

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P94000093783

**FILED**  
**Nov 12, 2007**  
**Secretary of State**

**Entity Name:** ISLAND BOUND MARINE SERVICES, INC.

**Current Principal Place of Business:**

1725 S. NOVA ROAD  
BLDG A-5  
SOUTH DAYTONA, FL 32119

**New Principal Place of Business:**

**Current Mailing Address:**

1725 S. NOVA ROAD  
BLDG A-5  
SOUTH DAYTONA, FL 32119

**New Mailing Address:**

**FEI Number:** 59-3286141      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANDERAU, FREDERICK C  
150 BERKLEY CIRCLE  
PORT ORANGE, FL 32129      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: ANDERAU, FREDERICK C  
Address: 150 BERKLEY CIRCLE  
City-St-Zip: PORT ORANGE, FL 32129

Title: VP      ( ) Delete  
Name: ANDERAU, JOANNE M  
Address: 150 BERKLEY CIRCLE  
City-St-Zip: PORT ORANGE, FL 32129

Title: ST      ( ) Delete  
Name: AFFRONTI, MICHELLE D  
Address: PO BOX 68  
City-St-Zip: NEW SMYRNA BEACH, FL 32170

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST      (X) Change ( ) Addition  
Name: ANDERAU, JOANNE M  
Address: 150 BERKLEY CIRCLE  
City-St-Zip: PORT ORANGE, FL 32129

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOANNE M. ANDERAU

VP

11/12/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date