## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000010293

DAVIE, FL 33325

City-St-Zip:

Entity Name: EAST COAST BOATING CORPORATION

FILED Apr 16, 2009 Secretary of State

| Current Principal Place of Business:        |   |                                | New Principal Place                         | New Principal Place of Business:             |  |
|---|---|--------------------------------|---|--|--|
|   | TATE RD 84<br>JDERDALE, FI                                  | _ 33312                        |   |  |  |
| Current Mailing Address:                    |   |                                | New Mailing Address                         | New Mailing Address:                         |  |
|   | 2ND STREET<br>JDERDALE, FI                                  | _ 33308                        |   |  |  |
| FEI Number:                                 | : 65-0817263  | FEI Number Applied For ( )     | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and                                    | Address of C  | urrent Registered Agent:       | Name and Address o                          | f New Registered Agent:                      |  |
| 2173 NE 6<br>FORT LAU<br>The above          | RADLEY T 2ND STREET JDERDALE, FI named entity s of Florida. |                                | purpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATU                                     |   |                                |   |  |  |
|   |   | ic Signature of Registered Ac  | gent  | Date   |  |
| Election Car                                | mpaign Financing  | g Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:                     |   |                                | ADDITIONS/CHANGI                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | JONES, BRADI<br>2173 NE 62ND                                |                                | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:                 | VP ( )<br>WADE, FRANK<br>970 SW 135 W                       |                                | Title:<br>Name:<br>Address:                 | () Change () Addition                        |  |

City-St-Zip:

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: BRADLEY T. JONES PRES 04/16/2009