## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 18, 2008 08:00 Al Secretary of State

DOCUMENT # P9900004788  1. Entity Name SUWANNEE BOAT HOLDER, INC.		881 		Secretary of St
Principal Plac	e of Business	Mailing Address		
Principal Place of Business  - 2814 SW 13TH ST GAINESVILLE, FL 32608  Mailing Address  - 2814 SW 13TH ST GAINESVILLE, FL 32608				
				01312008 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPA			CE	4. FEI Number Applied For
				59-3653291   Not Applicable
		•		5. Certificate of Status Desired   \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				
A) (CDA ) A	// (AAA A)		, .	
AVERA, WILLIAM N 2814 SW 13TH ST GAINESVILLE, FL 32608				DO NOT WRITE
				IN THIS SPACE
				III IIII OI AGE
8. 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. I am familiar with, and accept the obligations of registered agent				
The congenions of regionaries agent.				
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE: 1 1 2 3 5 (2) 5				
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fina     Trust Fund Contribution.		.00 May Be ded to Fees
10.	OFFICERS AND DI	RECTORS	•	
TITLE NAME	D AVERA, WILLIAM N			
STREET ADDRESS	2814 SW 13TH ST		I	Hannanoo i Loo
CITY-ST-ZIP	GAINESVILLE, FL 32608			### 02/27/08-80008-013 150.00
TITLE NAME			1	
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CITY-ST-ZIP			_	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/08

352)372-9999

Daylime Phone