2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S41636

Entity Name: MANGROVE COMPANIES LIMITED, INC.

FILED Apr 29, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1145 WHIPPOORWILL LANE 5931 SEA GRASS LN NAPLES, FL 34105 US NAPLES, FL 34116 US

Current Mailing Address: New Mailing Address:

1145 WHIPPOORWILL LANE 5931 SEA GRASS LN NAPLES, FL 34105 US NAPLES, FL 34116 US

FEI Number: 65-0298869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DELLECAVE, STEVEN F. PRES

1145 WHIPPOORWILL LANE

NAPLES, FL 34105 US

DELLECAVE, STEVEN F. PRES

5931 SEA GRASS LN

NAPLES, FL 34116 US

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: 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete Title: PC (X) Change () Addition
Name: DELLECAVE, STEVEN F PRES Name: DELLECAVE, STEVEN F PRES

 Address:
 1145 WHIPPOORWILL LANE
 Address:
 5931 SEA GRASS LN

 City-St-Zip:
 NAPLES, FL 34105
 City-St-Zip:
 NAPLES, FL 34116

Title: V () Delete Title: V (X) Change () Addition Name: SCHEREN, FRANK J Name: SCHERER, FRANK J

Address: 1145 WHIPPOORWILL LANE Address: 5931 SEA GRASS LN City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34116

Title: S () Delete Title: S (X) Change () Addition

 Name:
 SLAPPEY, TOMMY
 Name:
 SLAPPEY, TOMMY

 Address:
 1145 WHIPPOORWILL LANE
 Address:
 5931 SEA GRASS LN

 City-St-Zip:
 NAPLES, FL 34105
 City-St-Zip:
 NAPLES, FL 34116

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: STEVEN F DELLECAVE P 04/29/2008