

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S67300

FILED  
Sep 18, 2009  
Secretary of State

**Entity Name:** NEPTUNE CORPORATION OF THE TREASURE COAST

**Current Principal Place of Business:**

1058 S.E. PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

1910 S.E. PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34952

**Current Mailing Address:**

1956 SW BILTMORE RD  
PORT ST. LUCIE, FL 34984 US

**New Mailing Address:**

**FEI Number:** 65-0270785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHOONMAKER, RICHARD  
1948 SE PORT ST LUCIE BLVD  
PORT SAINT LUCIE, FL 34952 US

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

SCHOONMAKER, RICHARD  
1910 SE PORT ST LUCIE BLVD  
PORT SAINT LUCIE, FL 34952 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: RICHARD SCHOONMAKER

09/18/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: YOST, DANIEL  
Address: 2004 RIVER HAMMOCK LN  
City-St-Zip: FT PIERCE, FL

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

Title: D (X) Change ( ) Addition  
Name: YOST, DANIEL  
Address: 2004 RIVER HAMMOCK LN  
City-St-Zip: FT PIERCE, FL 34981

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: RICHARD SCHOONMAKER

RA

09/18/2009

Electronic Signature of Signing Officer or Director

Date