

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S71538

FILED  
Jan 13, 2008  
Secretary of State

Entity Name: CARRABELLE DOCKSIDE & OFFSHORE CONTRACTING, INC.

**Current Principal Place of Business:**

102 TARPINE DR.  
PANACEA, FL 32346

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 375  
PANACEA, FL 32346

**New Mailing Address:**

FEI Number: 59-3077202      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ANDREWS, HARRY M  
102 TARPINE DR.  
PANACEA, FL 32346      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ANDREWS, HARRY M  
Address: 102 TARPINE DR. P. O. BOX 375  
City-St-Zip: PANACEA, FL 32346

Title: VP (X) Delete  
Name: ANDREWS, SANDRA  
Address: 102 TARPINE DR. P. O. BOX 375  
City-St-Zip: PANACEA, FL 32346

Title: S (X) Delete  
Name: ANDREWS, MATTHEW  
Address: 102 TARPINE DR. P. O. BOX 375  
City-St-Zip: PANACEA, FL 32346

Title: T (X) Delete  
Name: ANDREWS, MICHAEL  
Address: 102 TARPINE DR. P. O. BOX 375  
City-St-Zip: PANACEA, FL 32322

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

Title: P,T, (X) Change ( ) Addition  
Name: ANDREWS, HARRY M  
Address: 102 TARPINE DR. P. O. BOX 375  
City-St-Zip: PANACEA, FL 32346

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: HARRY ANDREWS

P

01/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date