2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723069

Entity Name: LEMON BAY BOATERS, INC.

Current Principal Place of Business:

1949 ENGLEWOOD ROAD ENGLEWOOD. FL 34223

Current Mailing Address:

LEMON BAY BOATERS INC. 500 BOXWOOD LANE ENGLEWOOD, FL 34223-1969 US

FEI Number: 65-0049473 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MECKENBERG, GERALD 2388 SNOW DR ENGLEWOOD, FL 34224 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:

Electronic Signature of Registered Agent

Date

FILED Jan 28, 2014

Secretary of State

CC9615433818

Officer/Director Detail:

TitleD/TREASURERTitleD/VICE PRESIDENTNameHAHN, SANDRA LNameHAHN, DANE F

Address 500 BOXWOOD LANE Address 500 BOXWOOD LANE

City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: ENGLEWOOD FL 34223

Title DIRECTOR Title D/PRESIDENT

NameWILSON, ARTHURNameMECKENBERG, GERALDAddress7234 MAMOUTH STREETAddress7388 SNOW DRIVE

City-State-Zip: ENGLEWOOD FL 34224 City-State-Zip: ENGLEWOOD FL 34224

Title D/SECRETARY Title DIRECTOR

Name ABBOTT, JUDY A Name STRAUB, JAMES E

Address 6767 SAN CASA DRIVE LOT 98 Address 1924 PENNSYLVANIA AVE

City-State-Zip: ENGLEWOOD FL 34224 City-State-Zip: ENGLEWOOD FL 34224

Title DIRECTOR Title DIRECTOR

Name NIELSON, DAVID C Name CAHOW, JOHN C

Address 15392 LAKELAND CIRCLE Address 7220 BRANDYWINE DRIVE
City-State-Zip: PORT CHARLOTTE FL 33981 City-State-Zip: ENGLEWOOD FL 34224

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SANDRA L HAHN TREASURER 01/28/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name LEADBETTER, GRAHAM
Address 284 ROTONDA BLVD. N.
City-State-Zip: ROTONDA WEST FL 33947