## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 25, 2008 08:00 All Secretary of State DOCUMENT # P05000142330 NEW BERLIN BOAT AND RV SUPERSTORE PLUS, INC. Principal Place of Business Mailing Address **3443 GLENN HOLLOW COURT** 3443 GLENN HOLLOW COURT JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32226 CR2E034 (11/05) No Cha-P 02012008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3657793 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUBBARD, KIM K DO NOT WRITE 3730 BEACH BLVD JACKSONVILLE, FL 32207 IN THIS SPACE 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE U00000838407 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 03/05/08-80030-003 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PANTIN, SEAN NAME 3443 GLENN HOLLOW COURT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32226 TITLE NAME PANTIN, KERRY-ANN STREET ADDRESS 3443 GLENN HOLLOW COURT CITY-ST-ZIP JACKSONVILLE, FL 32226 DILE PANTIN, SEAN NAME STREET ADDRESS 3443 GLENN HOLLOW COURT DO NOT WRITE JACKSONVILLE, FL 32226 CITY-ST-ZIP TITLE IN THIS SPACE NAME PANTIN, KERRY-ANN 3443 GLENN HOLLOW COURT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32226 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone if