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**Feb 22, 1999 8:00 am**
**Secretary of State**
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NONPROFIT CORPORATION ANNUAL REPORT
**1999**

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717300

1. Corporation Name
OCEAN REEF CHAPEL, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 32 OCEAN REEF DRIVE<br>KEY LARGO FL 33037<br>US | 32 OCEAN REEF DRIVE<br>KEY LARGO FL 33037<br>US |

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

3. Date Incorporated or Qualifed: 10/06/1969

4. FEI Number: 23-7075036 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

**9. Name and Address of Current Registered Agent**

GARDNER, JAMES
20 DOLPHIN LN
OCEAN REEF CLUB
KEY LARGO FL 33037

**10. Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE James A Gardner 1/10/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | VPD | ☐ DELETE | 1.1 TITLE | PD | ☐ Change ☑ Addition |
| NAME | CHEVINS, ANTHONY | | 1.2 NAME | JAMES GARDNER | |
| STREET ADDRESS | 10 SOUTH RD | | 1.3 STREET ADDRESS | 20 DOLPHIN LANE | |
| CITY-ST-ZIP | KEY LARGO FL 33037 | | 1.4 CITY-ST-ZIP | ~~KEY LARGO, FL 33037~~ | |
| TITLE | TD | ☐ DELETE | 2.1 TITLE | SD | ☐ Change ☑ Addition |
| NAME | BATES, HENRY | | 2.2 NAME | JEANNIE SWENSON | |
| STREET ADDRESS | 108 ANDROS RD | | 2.3 STREET ADDRESS | 35 ISLAND DRIVE | |
| CITY-ST-ZIP | KEY LARGO FL 33037 | | 2.4 CITY-ST-ZIP | ~~KEY LARGO, FL 33037~~ | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | |

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** James A Gardner **SIGNATURE REQUIRED** 305-367-3338
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
JAMES A GARDNER 1/10/99