## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Mar 03, 2005 8:00 am Secretary of State

DOCUMENT # 717300  1. Entity Name OCEAN REEF CHAPEL, INC.					03-03-2005 90181 016 ****70.00		
Principal Place	e of Business with the 1-th	Mailing Address 32 OCEAN REEF DRIVE KEY LARGO, FL. 33037		A CONTRACTOR OF THE CONTRACTOR	- 1 55 C KAK 12 E L 18 Inii 380 886 81		35 
2. Principal P	lace of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02282005 Chg	-NP	CR2E037 (10/03)	
City & State		City & State		4. FEI Number 23-7075036			oplied For
Zip	Country	Zip	Country	5. Certificate of Statu	us Desired	\$8.75 Add	titional
	6. Name and Address of Curre	nt Registered Agent		7. Name and Addre	ss of New Reg	istered Agent	
CUEVING	ANTHONY		Name				
CHEVINS, ANTHONY 10 S RD OCEAN REEF CLUB KEY LARGO, FL 33037			Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
RETLANC	50, FL 33037		City			FL Zip Cod	e
8. The above	named entity submits this statemen	t for the purpose of changing its	registered office or regis	stered agent, or both, in the	e State of Florio	la. I am lamiliar with,	and accept
the obligat	ions of registered agent.  Signature, typed or printed name of registered ag	and and title it anothers in					
	Signature, typed or printed name or registered as	tent and little it applicable. (NO)	E: Registered Agent signature req	uired when reinstating)	e dan e sanci.	DATE	
Andrea Tage 18	Filing Fee is \$61.25 Due by May 1, 2005	1. 1	npaign Financing		Mak	e check payable to Department of S	o S. F
10.	Filling Fee is \$61.25	9. Election Car Trust Fund C	npaign Financing		Florida	e check payable to Department of S	o late
10.	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND	9. Election Car Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees	Florida	e check payable to Department of S	o late
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND TD BATES, HENRY	9. Election Car Trust Fund C	Ontribution.   11.  ITITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	\$5.00 May Be Added to Fees	Florida	e check payable to Department of S	i 10 Addition
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Thereby centry that the information supplied with this riting does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is fue and accurate and that my signature shall have the same legal effect as if made under orabit; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR