

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007684

FILED
Apr 12, 2008
Secretary of State

Entity Name: MOTHER OCEAN FOUNDATION, INC.

Current Principal Place of Business:

900 CROSS LAKE DR
MELBOURNE, FL 329018467

New Principal Place of Business:

Current Mailing Address:

900 CROSS LAKE DR
MELBOURNE, FL 329018467

New Mailing Address:

FEI Number: 08-0887038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGNER, DANIEL C
900 CROSS LAKE DR
MELBOURNE, FL 329018647 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WAGNER, DANIEL C
Address: 900 CROSS LAKE DR
City-St-Zip: MELBOURNE, FL 32901

Title: D () Delete
Name: AMBROSE, CHRISTINE
Address: 13093 HENRY BRADEL DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: GAGNON, DENNIS
Address: 443 S VILLA AVE
City-St-Zip: VILLA PARK, IL 60181

Title: D () Delete
Name: BOYKIN, BILLY
Address: 117 2ND AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: VENABLE, JAY
Address: 132 15TH ST E BLDG 10 UNIT 101
City-St-Zip: TIERRE VERDE, FL 33715

Title: D () Delete
Name: BELL, LAWRENCE W
Address: 20440 SAN RAFAEL CT
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: AMBROSE, CHRISTINE
Address: 13093 HENRY BEADLE DR
City-St-Zip: TALLAHASSEE, FL 32312

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

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

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

Title: D (X) Change () Addition
Name: BELL, LAWRENCE W
Address: 207 S. PALM AVE.
City-St-Zip: INDIALANTIC, FL 329033103

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

SIGNATURE: DANIEL C. WAGNER

PRES

04/12/2008

Electronic Signature of Signing Officer or Director

Date