2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2008
Secretary of State

DOCUMENT# N05000003576

Entity Name: ATLANTIS REEF FOUNDATION, INC.

Current Principal Place of Business:

4950 TRADEWINDS TERR
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

1111 NW 48TH STREET
FORT LAUDERDALE, FL 33309

Current Mailing Address:

4950 TRADEWINDS TERR
FORT LAUDERDALE, FL 33312

New Mailing Address:

1111 NW 48TH STREET
FORT LAUDERDALE, FL 33309

FEI Number: 14-1926825 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEVINE, GARY L MR.
4950 TRADEWINDS TERR
FT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

OLSON, CARL R MR.
111 NW 48TH STREET
FT LAUDERDALE, FL 33309 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: CARL R. OLSON 05/30/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BRANDELL, KIM
Address: 4950 TRADEWINDS TERR
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D ( ) Delete
Name: LEVINE, GARY
Address: 4950 TRADEWINDS TERR
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: OLSON, CARL
Address: 1111 NW 48TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D (X) Change ( ) Addition
Name: CURTIS, CAROL MS.
Address: 1111 NW 48TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Change (X) Addition
Name: ALLISON-COHEN, LYNNIA MS.
Address: 8022 FISHER ISLAND DRIVE
City-St-Zip: MAIMI, FL 33109

Title: D ( ) Change (X) Addition
Name: GITIN, DAVID L
Address: 575 CRANDON BLVD #711
City-St-Zip: KEY BISCAYNE, FL 33149

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: CARL R. OLSON PRES 05/30/2008
Electronic Signature of Signing Officer or Director Date