

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14761

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** THE SEA TURTLE PRESERVATION SOCIETY, INC.

**Current Principal Place of Business:**

111 S. MIRAMAR AVE.  
INDIALTANTIC, FL 32903 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 510988  
MELBORNE BCH, FL 329510988 US

**New Mailing Address:**

FEI Number: 59-2856913      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BECKETT, DAN  
687 TUPELO DR  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

SPLITT, MIKE  
3594 EGRET DRIVE  
MELBOURNE, FL 32901 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: MIKE SPLITT

04/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SMITH, BRANDON  
Address: 482 DELMONICO ST  
City-St-Zip: PALM BAY, FL 32907

Title: D ( ) Delete  
Name: STEWART, CHRISTIN  
Address: 549 LAKE VICTORIA CIR  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: YATES, NANCY  
Address: 1477 S. BELFORD CT  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Delete  
Name: HOCHBERG, DAVID  
Address: 1350 ATLANTIC ST APT 2  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D ( ) Delete  
Name: HEYES, GERALD C  
Address: 463 SPOONBILL LANE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TD ( ) Delete  
Name: BRAULICH, ALBERT  
Address: 148 MAIMI AVE  
City-St-Zip: INDIALANTIC, FL 32903

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: MIKE SPLITT

C

04/14/2009

Electronic Signature of Signing Officer or Director

Date