

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707605

Entity Name: FLORIDA OCEANOGRAPHIC SOCIETY, INC.**Current Principal Place of Business:**890 N.E. OCEAN BLVD.
STUART, FL 34996**Current Mailing Address:**890 N.E. OCEAN BLVD.
STUART, FL 34996 US**FEI Number: 59-1114306****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FIELDS, JORDAN
416 CORTEZ AVE.
STUART, FL 33494 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	VC
Name	BROWN, VICKI
Address	27 EMARITA WAY
City-State-Zip:	STUART FL 34996

Title	TREASURER
Name	COCORULLO, L MARK
Address	20 ISLAND ROAD
City-State-Zip:	STUART FL 34996

Title	CHAIRMAN
Name	WINTERCORN, PHILIP
Address	912 SW WHISPER RIDGE TRAIL
City-State-Zip:	PALM CITY FL 34990

Title	SECRETARY
Name	BYERS, FRANK JR.
Address	221 NE PLANTATION ROAD SUITE 410
City-State-Zip:	STUART FL 34996

I hereby 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 all other like empowered.

SIGNATURE: PHILIP WINTERCORN**CHAIRMAN****04/25/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date