

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004192

Entity Name: THE OCTOPUS MOVEMENT INC.**Current Principal Place of Business:**SCOTT CHAPPELL
48 SOUTH PARK STREET UNIT 174
MONTCLAIR, NJ 07042**Current Mailing Address:**SCOTT CHAPPELL
48 SOUTH PARK STREET UNIT 174
MONTCLAIR, NJ 07042 US**FEI Number:** 46-5441444**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ZEIGLER, KAREN
1463 REYNARD DRIVE
FORT MYERS, FL 33919 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:** KAREN M. ZEIGLER

02/10/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	ZEIGLER, KAREN M
Address	1463 REYNARD DRIVE
City-State-Zip:	FORT MYERS FL 33919

Title	PRESIDENT
Name	CHAPPELL, SCOTT
Address	48 SOUTH PARK STREET UNIT #174
City-State-Zip:	MONTCLAIR NJ 07042

Title	DIRECTOR
Name	ALSOP, KATHARINE
Address	210 11TH AVENUE
City-State-Zip:	ROCHESTER MN 55906

Title	DIRECTOR
Name	CAMPBELL, JANICE DR.
Address	6144 CHINQUAPIN PARKWAY
City-State-Zip:	BALTIMORE MD 21239

Title	DIRECTOR
Name	SPRINKLE, DARREN
Address	3850 KLAHANIE DRIVE SE #21-301
City-State-Zip:	SAMMAMISH WI 98029

Title	DIRECTOR
Name	KURUVILLA, SARAH
Address	1410 DIAMOND STREET
City-State-Zip:	REDONDO CA 90277

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: KAREN ZEIGLER**OFFICER/REGISTERED
AGENT**

02/10/2025

Electronic Signature of Signing Officer/Director Detail

Date