

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15400

**Entity Name:** ORGANIZATION FOR ARTIFICIAL REEFS, INC.

**Current Principal Place of Business:**

2545 BLAIRSTONE PINES DR  
100  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

2545 BLAIRSTONE PINES DR  
100  
TALLAHASSEE, FL 32301 US

**FEI Number:** 59-2709539

**Certificate of Status Desired:** Yes

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

STRANGE, KAREN  
2545 BLAIRSTONE PINES DR  
100  
TALLAHASSEE, FL 32301 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 STRANGE

01/04/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name BUDA, ROB  
Address 2545 BLAIRSTONE PINES DR 100  
City-State-Zip: TALLAHASSEE FL 32301

Title CD  
Name RICHARDSON, ALAN  
Address 2545 BLAIRSTONE PINES DR 100  
City-State-Zip: TALLAHASSEE FL 32301

Title D  
Name TIEFEL, LYNDIA  
Address 2545 BLAIRSTONE PINES  
City-State-Zip: TALLAHASSEE FL 32301

Title DT  
Name STRANGE, KAREN  
Address 2545 BLAIRSTONE PINES DR  
100  
City-State-Zip: TALLAHASSEE FL 32301

*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 STRANGE

**TREASURER**

01/04/2018

Electronic Signature of Signing Officer/Director Detail

Date