

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 284954

FILED
Feb 14, 2008
Secretary of State

Entity Name: THE OCEAN MEWS, INC.

Current Principal Place of Business:

6845 N. OCEAN BLVD.
OCEAN RIDGE, FL 33435

New Principal Place of Business:

Current Mailing Address:

6855 N. OCEAN BLVD.
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: 59-1114821 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLERANO, JR., JAMES A
1201 GEORGE BUSH BOULEVARD
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: MCKINNEY, JOHN
Address: 6845 N. OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DT () Delete
Name: RUSSELL, B P,
Address: 6845 N. OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL

Title: VD () Delete
Name: FITZGERALD, BRIAN
Address: 6845 N. OCEAN BLVD.
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VD () Delete
Name: OFFRAY, CLAUDE MRS.
Address: 6845 N. OCEAN BLVD.
City-St-Zip: OCEAN RIDGE, FL 33435

Title: PD () Delete
Name: POWERS, ROGER MR.
Address: 6845 N. OCEAN BLVD.
City-St-Zip: OCEAN RIDGE, FL 33435

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER POWERS

PD

02/14/2008

Electronic Signature of Signing Officer or Director

_____ Date