## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#717300** 

FILED Jaņ 16, 2<u>00</u>9 Secretary of State

Entity Name: OCEAN REEF CHAPEL, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

32 OCEAN REEF DRIVE KEY LARGO, FL 33037 US

**Current Mailing Address: New Mailing Address:** 

32 OCEAN REEF DRIVE KEY LARGO, FL 33037 US

FEI Number: 23-7075036 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COPELAND, DARRYL 9 TORCHWOOD LANE OCEAN REEF CLUB KEY LARGO, FL 33037 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

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition MCCOLLUM, JACK RICE, LACY Name: Name:

12 OSPREY LN Address: 32 SUNSET CAY DRIVE Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: KEY LARGO, FL 33037

Title: Title: ( ) Delete () Change () Addition Name: COPELAND, DARRYL Name:

Address: 9 TORCHWOOD LANE Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition MCCOLLUM, JACK Name: DAVIDSON, BARRY Name:

12 OSPREY LANE 437 SOUTH HARBOR DRIVE Address: Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: KEY LARGO, FL 33037

Title: ( ) Delete Title: () Change () Addition

Name: DELGADO, GAIL Name: 239 SOUTH BAY HARBOR DRIVEH Address: Address: City-St-Zip: KEY LARGO, FL 33037 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: GAIL DLEGADO SECT 01/16/2009