

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90085 048 ****61.25

DOCUMENT # 758263 1. Entity Name NATIONAL WEEK OF THE OCEAN, INC.																																																																																																																																									
Principal Place of Business C/O CYNTHIA C. HANCOCK 516 BONTONA AVENUE FT. LAUDERDALE, FL 33301			Mailing Address C/O CYNTHIA C. HANCOCK 516 BONTONA AVENUE FT. LAUDERDALE, FL 33301																																																																																																																																						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																																																							
Suite, Apt. #, etc. 516 BONTONA AVE		Suite, Apt. #, etc. PO BOX 179																																																																																																																																							
City & State FT LAUDERDALE, FL		City & State FT LAUDERDALE																																																																																																																																							
Zip 33301	Country USA	Zip 33302	Country USA	4. FEI Number 59-2169638																																																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																																																																																																																																					
6. Name and Address of Current Registered Agent HANCOCK, CYNTHIA C. 516 BONTONA AVENUE FT. LAUDERDALE, FL 33301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																																					
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																																									
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																									
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																																					
Make check payable to Florida Department of State																																																																																																																																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 15%;">SD</td> <td style="width: 15%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>KALVAITIS, LEE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2972 RIVERLAND RD</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>FT LAUD, FL 33312</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>FRIEDEL, PAULETTE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4712 VAN BUREN ST</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>HOLLYWOOD, FL 33021</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VPD</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HANCOCK, DANE R</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>516 BONTONA AVE</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>FT LAUDERDALE, FL 33301</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>SIGLER, MARIE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>10039 RAMBLEWOOD DRIVE</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>CORAL SPRINGS, FL 33071</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HESSMANN, JOE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>200 S. BIRCH RD.</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>FT LAUDERDALE, FL 33316</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PD</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HANCOCK, CYNTHIA C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>516 BONTONA AVE</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>FT LAUDERDALE, FL 33301</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 15%;">SD</td> <td style="width: 15%; text-align: center;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>HAMMOND, PAUL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6185 WOODBURY ROAD</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>BOCA RATON, FL 33433</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>DECKER, MARCH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7100 HARDING STREET</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>HOLLYWOOD, FL 33024</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	SD	<input type="checkbox"/> Delete	NAME	KALVAITIS, LEE		STREET ADDRESS	2972 RIVERLAND RD		CITY - ST - ZIP	FT LAUD, FL 33312		TITLE	D	<input type="checkbox"/> Delete	NAME	FRIEDEL, PAULETTE		STREET ADDRESS	4712 VAN BUREN ST		CITY - ST - ZIP	HOLLYWOOD, FL 33021		TITLE	VPD	<input type="checkbox"/> Delete	NAME	HANCOCK, DANE R		STREET ADDRESS	516 BONTONA AVE		CITY - ST - ZIP	FT LAUDERDALE, FL 33301		TITLE	D	<input type="checkbox"/> Delete	NAME	SIGLER, MARIE		STREET ADDRESS	10039 RAMBLEWOOD DRIVE		CITY - ST - ZIP	CORAL SPRINGS, FL 33071		TITLE	D	<input type="checkbox"/> Delete	NAME	HESSMANN, JOE		STREET ADDRESS	200 S. BIRCH RD.		CITY - ST - ZIP	FT LAUDERDALE, FL 33316		TITLE	PD	<input type="checkbox"/> Delete	NAME	HANCOCK, CYNTHIA C		STREET ADDRESS	516 BONTONA AVE		CITY - ST - ZIP	FT LAUDERDALE, FL 33301		TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	HAMMOND, PAUL		STREET ADDRESS	6185 WOODBURY ROAD		CITY - ST - ZIP	BOCA RATON, FL 33433		TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	DECKER, MARCH		STREET ADDRESS	7100 HARDING STREET		CITY - ST - ZIP	HOLLYWOOD, FL 33024		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
TITLE	SD	<input type="checkbox"/> Delete																																																																																																																																							
NAME	KALVAITIS, LEE																																																																																																																																								
STREET ADDRESS	2972 RIVERLAND RD																																																																																																																																								
CITY - ST - ZIP	FT LAUD, FL 33312																																																																																																																																								
TITLE	D	<input type="checkbox"/> Delete																																																																																																																																							
NAME	FRIEDEL, PAULETTE																																																																																																																																								
STREET ADDRESS	4712 VAN BUREN ST																																																																																																																																								
CITY - ST - ZIP	HOLLYWOOD, FL 33021																																																																																																																																								
TITLE	VPD	<input type="checkbox"/> Delete																																																																																																																																							
NAME	HANCOCK, DANE R																																																																																																																																								
STREET ADDRESS	516 BONTONA AVE																																																																																																																																								
CITY - ST - ZIP	FT LAUDERDALE, FL 33301																																																																																																																																								
TITLE	D	<input type="checkbox"/> Delete																																																																																																																																							
NAME	SIGLER, MARIE																																																																																																																																								
STREET ADDRESS	10039 RAMBLEWOOD DRIVE																																																																																																																																								
CITY - ST - ZIP	CORAL SPRINGS, FL 33071																																																																																																																																								
TITLE	D	<input type="checkbox"/> Delete																																																																																																																																							
NAME	HESSMANN, JOE																																																																																																																																								
STREET ADDRESS	200 S. BIRCH RD.																																																																																																																																								
CITY - ST - ZIP	FT LAUDERDALE, FL 33316																																																																																																																																								
TITLE	PD	<input type="checkbox"/> Delete																																																																																																																																							
NAME	HANCOCK, CYNTHIA C																																																																																																																																								
STREET ADDRESS	516 BONTONA AVE																																																																																																																																								
CITY - ST - ZIP	FT LAUDERDALE, FL 33301																																																																																																																																								
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition																																																																																																																																							
NAME	HAMMOND, PAUL																																																																																																																																								
STREET ADDRESS	6185 WOODBURY ROAD																																																																																																																																								
CITY - ST - ZIP	BOCA RATON, FL 33433																																																																																																																																								
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition																																																																																																																																							
NAME	DECKER, MARCH																																																																																																																																								
STREET ADDRESS	7100 HARDING STREET																																																																																																																																								
CITY - ST - ZIP	HOLLYWOOD, FL 33024																																																																																																																																								
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																							
NAME																																																																																																																																									
STREET ADDRESS																																																																																																																																									
CITY - ST - ZIP																																																																																																																																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																							
NAME																																																																																																																																									
STREET ADDRESS																																																																																																																																									
CITY - ST - ZIP																																																																																																																																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																							
NAME																																																																																																																																									
STREET ADDRESS																																																																																																																																									
CITY - ST - ZIP																																																																																																																																									
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																									
SIGNATURE: <u>CYNTHIA HANCOCK</u> CYNTHIA HANCOCK 3-11-07 954-462-5573 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																									