2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE

FILED Mar 06, 2001 8:00 am Secretary of State **DOCUMENT # 762583** 1. Entity Name THE OCEAN IMPACT FOUNDATION, INC. 03-06-2001 90300 022 ****70.00 Principal Place of Business Mailing Address C/O PBC ANIMAL CONTROL 7100 BELVEDERE RD 7100 BELVEDERE RD. W PALM BCH FL 33411 W PALM BCH FL 33411 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2432510 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7.-Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Name D. M. Sauve Street Address (P.O. Box Number is Not Acceptable) COLBURN, HARRY SOR 941 N HIGHWAY AIA 001P Belvedere Ra. JUPPER FL 33477 Zip Code 334リ W. Palm 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. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Dianne M. SALVE 7100 Belvedere Rd. TITLE Change ☐ Addition TITLE Delete NAME MERCER-SAUVE, DIANNE NAME 1962-S-CONGRESS AVE STREET ADDRESS STREET ADDRESS W. Pain. But, Fl 33411 CITY-ST-ZIP CITY-ST-ZIP W-PALM BCH FL DR. George Floyd 3245 Forest Hill SD TITLE Change ☐ Addition ☐ Delete TITLE Blugi FLOYD, DR. GEORGE NAME: T NAME----IN. P. Buh Fl. 33406 STREET ADDRESS STREET ADDRESS 1962 S CONGRESS AVE CITY-ST-ZIP CITY-ST-ZIP W-PALM BEACH FL ☐ Delete TITLE ☐ Change ☐ Addition TITLE SHEAROUSE, SUE NAME NAME STREET ADDRESS STREET ADDRESS 7100 BELVEDERE RD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33411 TITLE Change ☐ Addition ☐ Delete TITLE FIELDS, PAMELA NAME NAME 7100 BELVEDERE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33411 ☐ Addition TITLE Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

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