## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#765722** 

FILED Feb 14, 2005 Secretary of State

Entity Name: MARINE SCIENCE GRADUATE STUDENT ORGANIZATION, INC.

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

4600 RICKENBACKER CAUSEWAY

MIAMI, FL 33149

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

ON, INC. ATTN: MSGSO TREASURER 4600 RICKENBACKER CAUSEWAY MIAMI, FL 33149

FEI Number: 59-2238104 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:

AL KHARUSI, LAIYYAN M 4600 RICKENBACKER CSWY DIVISION OF METEOROLOGY

4600 RICKENBACKER CSWY DIVISION OF MARINE BIOLOGY & FISHERIES MIAMI, FL 33149 US MIAMI, FL 33149 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.

BRINSON, AYEISHA A

SIGNATURE: AYEISHA BRINSON 02/14/2005

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIAMI, FL 33149

(X) Change ( ) Addition

() Delete AL KHARUSI, LAIYYAN BRINSON, AYEISHA Name: Name: 4600 RIKENBACKER CSWY Address: 4600 RIKENBACKER CSWY Address: City-St-Zip: MIAMI, FL 33149

City-St-Zip: MIAMI, FL 33149

Title: PD () Delete Title: (X) Change ( ) Addition DONAHUE, DEANNA Name: MARGOLIN, CAROLYN Name: Address: 4600 RICKENBACKER CSWY Address: 4600 RICKENBACKER CSWY

City-St-Zip: MIAMI, FL 33149

Title: VD. () Delete Title: () Change () Addition

LAHBERG, TAMMY Name: Name: 4600 RICKENBACKER CSWY Address: Address: City-St-Zip: MIAMI, FL 33149 City-St-Zip:

Title: SD (X) Delete Title: () Change () Addition

Name: SCOTT, CINDA Name: 4600 RICKENBACKER CSWY Address: Address: City-St-Zip: MIAMI, FL 33149 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: AYEISHA BRINSON TD 02/14/2005