2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2006
Secretary of State

DOCUMENT# F04000005934

Entity Name: THE SURFRIDER FOUNDATION, INC.

Current Principal Place of Business:

120 1/2 S. EL CAMINO REAL #207
SAN CLEMENTE, CA 92672

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6010
SAN CLEMENTE, CA 926746010

New Mailing Address:

FEI Number: 95-3941826 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: ORBACH, MIKE
Address: 135 DUKE MARINE LAB ROAD
City-St-Zip: BEAUFORT, NC 25816

Title: VC ( ) Delete
Name: ROSENBLATT, BILL
Address: 2002 SUNSET AVE
City-St-Zip: OCEAN, NJ 07712

Title: D ( ) Delete
Name: HOFER, HAROLD
Address: 1419 DOLPHIN TERRACE
City-St-Zip: CORONA DEL MAR, CA 92625

Title: D ( ) Delete
Name: ANDERSON, LANCE
Address: 2538 MONACO DRIVE
City-St-Zip: LAGUNA BEACH, FL 92651

Title: S ( ) Delete
Name: BAILIFF, MEGAN
Address: 1721 CALLE DELICADA
City-St-Zip: LA JOLLA, CA 92037

Title: D ( ) Delete
Name: CHYTILO, MARC
Address: 1505 MISSION CANYON ROAD
City-St-Zip: SANTA BARBARA, CA 93105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ORBACH, MIKE
Address: 135 DUKE MARINE LAB ROAD
City-St-Zip: BEAUFORT, NC 25816

Title: C (X) Change ( ) Addition
Name: ROSENBLATT, BILL
Address: 2002 SUNSET AVE
City-St-Zip: OCEAN, NJ 07712

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 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: MICHELLE C KREMER COO 07/14/2006

Electronic Signature of Signing Officer or Director — Date