## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F92000000767

Entity Name: REEF MANAGEMENT CO.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1551 VIA TUSCANY WINTER PARK, FL 32789 US	2471 ALOMA AVENUE SUITE 101 WINTER PARK, FL 32792 US
Current Mailing Address:	New Mailing Address:
1551 VIA TUSCANY WINTER PARK, FL 32789 US	PO BOX 3537 WINTER PARK, FL 32790 US
FEI Number: 65-0377206 FEI Number Applied For ( )	I Number Not Applicable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
JENKINS, JILL M 1551 VIA TUSCANY WINTER PARK, FL 32789 US	JENKINS, JILL M 2471 ALOMA AVENUE SUITE 101 WINTER PARK, FL 32792 US
The above named entity submits this statement for the purpoin the State of Florida.	se of changing its registered office or registered agent, or both,
SIGNATURE:	04/16/2009
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D () Delete Name: BRYAN, SUSAN	Title: ( ) Change ( ) Addition Name:

31 OCEAN REEF DRIVE STE A101 Address: City-St-Zip: KEY LARGO, FL 33037

Title: () Delete HILMER, WAYNE J Name: Address: 1551 VIA TUSCANY

WINTERPARK, FL 32789 City-St-Zip:

Title: ( ) Delete Name: JENKINS, JILL M 1551 VIA TUSCANY Address: City-St-Zip: WINTER PARK, FL 32789

Title: () Delete JENKINS, JILL Name:

Address: 1551 VIA TUSCANY WINTER PARK, FL 32789 City-St-Zip:

Address: City-St-Zip:

Title: (X) Change ( ) Addition

Name: HILMER, WAYNE J Address: PO BOX 3537

WINTERPARK, FL 32790 City-St-Zip:

Title: (X) Change ( ) Addition Name: JENKINS, JILL M Address: PO BOX 3537

City-St-Zip: WINTER PARK, FL 32790

Title: (X) Change ( ) Addition

JENKINS, JILL M Name: Address: PO BOX 3537

WINTER PARK, FL 32790 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JILL M JENKINS 04/16/2009 S