2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

DOCUMENT # F95000005132 Secretary of State 1. Entity Name 03-15-2005 90037 001 ****61.25 MARINE RESOURCES DEVELOPMENT FOUNDATION, INC. Principal Place of Business Mailing Address PO BOX 787 KEY LARGO FL 33037 PO BOX 787 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 67-0258256 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KOBLICK, IAN G Street Address (P.O. Box Number is Not Acceptable) 51 SHORELAND DR KEY LARGO FL 33037 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005-Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TATLE VP ☐ Change Addition KOBLICK, IAN G NAME NAME Ginette Hughes 51 SHORELAND DR STREET ADDRESS STREET ADDRESS 688 Dolphin Ave. KEY LARGO FL 33037 CITY-ST-ZIP CITY-ST-ZIP Key Largo, FL 33037 TITLE ☐ Delete TITLE ☐ Change Addition VP, D KOBLICK, TONYA A NAME NAME Bob Russell 51 SHORELAND DR STREET ADDRESS STREET ADDRESS 240 Treasure Harbor Drive KEY LARGO FL 33037 CITY-ST-ZIP CITY-ST-ZIP Islamora<u>da, FL 33036</u> TITLE Delete TITLE ☐ Change Addition SMENDA, JOANN. NAME ---NAME Neil Tr Monney P.O. BOX 670 STREET ADDRESS STREET ADDRESS 49 Shoreland Drive Key Largo, FL 33037 CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-ZIP TITLE ★ Delete TITLE Addition BASS, GERRY Craig Mullen NAME NAME 147 SW 63RD CT STREET ADDRESS STREET ADDRESS MIAMI FL 33158 Siasconset, MA 02564 CITY - ST - ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition MITHCELL, ARTHUR NAME Gerry BAss 241 LIGNUM VITAE STREET ADDRESS STREET ADDRESS 5845 Paradise Circle #15, SuitE 100 KEY LARGO FL 33037 CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34110 TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Mar 15, 2005 8:00 am