

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # M49896

1. Entity Name
ORGANIZATION DYNAMICS INTERNATIONAL, INC.



Principal Place of Business

3605 SOUTH OCEAN BLVD.
APT.208-B
SOUTH PALM BEACH, FL 33480

Mailing Address

3605 SOUTH OCEAN BLVD.
APT.208-B
SOUTH PALM BEACH, FL 33480



03062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2789723

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COFFEY, THOMAS
3605 SOUTH OCEAN BLVD.
APT.208-B
SOUTH PALM BEACH, FL 33480

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	COFFEY, THOMAS
STREET ADDRESS	3605 SO. OCEAN BLVD.
CITY-ST-ZIP	SO. PALM BEACH, FL
TITLE	VSD
NAME	COFFEY, MARY E.
STREET ADDRESS	3605 SO. OCEAN BLVD.
CITY-ST-ZIP	SO. PALM BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/15/08-80024-025 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas Coffey
THOMAS COFFEY

4/1/08

Date

561 533 0592

Daytime Phone #