

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M89149

FILED
Jan 20, 2004
Secretary of State

Entity Name: OCEAN ENGINEERING ASSOCIATES INC.

Current Principal Place of Business:

2531 NW 41ST ST
GAINESVILLE, FL 32606

New Principal Place of Business:

2531 NW 41ST ST
BLDG. D
GAINESVILLE, FL 32606

Current Mailing Address:

% DONALD MAX SHEPPARD
1656 NW 22ND CIRCLE
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-3172265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEPPARD, DONALD MAX
1656 NW 22ND CR.
GAINESVILLE, FL 32605 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHEPPARD, DONALD MAX,
Address: 1656 NW 22ND CR.
City-St-Zip: GAINESVILLE, FL

Title: T () Delete
Name: SHEPPARD, ALICIA L
Address: 1656 N.W. 22ND CIRCLE
City-St-Zip: GAINESVILLE, FL

Title: VP () Delete
Name: GOSSELIN, MARK
Address: 4830 NW 43RD ST., APT E-69
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GOSSELIN, MARK
Address: 11421 N.W. 17TH LANE
City-St-Zip: GAINESVILLE, FL 32606

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

SIGNATURE: ALICIA L. SHEPPARD

TREA

01/20/2004

Electronic Signature of Signing Officer or Director

Date