

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000182

FILED
Mar 19, 2007
Secretary of State

Entity Name: UPPER KEYS ARTIFICIAL REEF FOUNDATION, INC.

Current Principal Place of Business:

106000 OVERSEAS HIGHWAY
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

106000 OVERSEAS HIGHWAY
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 60-0002573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDER, JACKLYN R
106000 OVERSEAS HIGHWAY
KEY LARGO, FL 33030 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: BROWN, BETTE
Address: 97670 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: SHIPLEY, MIKE
Address: 92530 OVERSEAS HIGHWAY
City-St-Zip: TAVERNER, FL 33070

Title: D () Delete
Name: BLESER, ROB
Address: 103500 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: P () Delete
Name: HARDER, JACKLYN R
Address: 106000 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: D () Change (X) Addition
Name: LAZO, NELSON
Address: 91500 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: D () Change (X) Addition
Name: THARP, TOM
Address: 1608 MONMOUTH LANE
City-St-Zip: KEY LARGO, FL 33037

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: JACKLYN R. HARDER

P

03/19/2007

Electronic Signature of Signing Officer or Director

Date