

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005497

FILED
May 01, 2008
Secretary of State

Entity Name: ORIGINAL SAVE OUR BEACH, INC.

Current Principal Place of Business:

411 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 493
DEERFIELD BEACH, FL 33443

New Mailing Address:

FEI Number: 20-0103826 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CONNICK, A. THOMAS ESQ.
411 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441 US

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: PD () Delete
Name: WILLETT, BETT
Address: 48 NE 19TH TERR.
City-St-Zip: DEERFIELD BEACH, FL 33441 FL

Title: PD () Delete
Name: MCGEARY, MARTI
Address: 1442 SE 6 ST.
City-St-Zip: DEERFIELD BEACH, FL 33441 FL

Title: TD () Delete
Name: MCGEARY, JIM
Address: 1442 SE 6 ST.
City-St-Zip: DEERFIELD BEACH, FL 33441 FL

Title: D () Delete
Name: CARRIG, JOANNE
Address: 800 OCEAN BLVD., UNIT 608
City-St-Zip: DEERFIELD BEACH, FL 33441 FL

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:

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

SIGNATURE: MARTI MC GEARY

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date