

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005497

FILED  
Jan 24, 2009  
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 ( )

**Name and Address of Current Registered Agent:**

CONNICK, A. THOMAS ESQ.  
411 EAST HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 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: 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: PD (X) Change ( ) Addition  
Name: WILLETT, BETT  
Address: 2646 EMERALD WAY CIRCLE  
City-St-Zip: DEERFIELD BEACH, FL 33442 FL

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: MARTHA A. MCGEARY

PD

01/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date