

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 27, 2005  
Secretary of State**

DOCUMENT# N03000005641

Entity Name: OFFSHORE NOT FOR PROFIT, INC.

**Current Principal Place of Business:**

240 NORTH WASHINGTON BLVD.  
7TH FLOOR  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

**Current Mailing Address:**

240 NORTH WASHINGTON BLVD.  
7TH FLOOR  
SARASOTA, FL 34236 US

**New Mailing Address:**

FEI Number: 42-1597924      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:**

BRANCH, DAVID  
240 NORTH WASHINGTON BLVD.  
7TH FLOOR  
SARASOTA, FL 34236 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: P ( ) Delete  
Name: BRANCH, DAVID C  
Address: 240 NORTH WASHINGTON BLVD., 7TH FLOOR  
City-St-Zip: SARASOTA, FL 34236 US

Title: CO ( ) Delete  
Name: WALIGORA, KIRSTEN  
Address: 240 NORTH WASHINGTON BLVD., 7TH FLOOR  
City-St-Zip: SARASOTA, FL 34236 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

SIGNATURE: DAVID BRANCH

P

07/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date