

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000168

FILED
Feb 14, 2006
Secretary of State

Entity Name: HUBBS FLORIDA OCEAN FUND, INC.

Current Principal Place of Business:

6295 SEA HARBOR DR
ORLANDO, FL 328218043

New Principal Place of Business:

Current Mailing Address:

6295 SEA HARBOR DR
ORLANDO, FL 328218043

New Mailing Address:

FEI Number: 86-1100953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE FREESE, DUANE
6295 SEA HARBOR DRIVE
ORLANDO, FL 32821 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: D () Delete
Name: KENT, DON
Address: 2595 INGRAHAM ST
City-St-Zip: SAN DIEGO, CA 92109

Title: D () Delete
Name: DE FREESE, DUANE
Address: 6295 SEA HARBOR DR
City-St-Zip: ORLANDO, FL 32821

Title: D () Delete
Name: GALBRAITH, JAY
Address: 6295 SEA HARBOR DR
City-St-Zip: ORLANDO, FL 32821

Title: D () Delete
Name: ATCHISON, JIM
Address: 7007 SEA WORLD DR
City-St-Zip: ORLANDO, FL 32821

Title: D () Delete
Name: BIEBERBACH, BILL
Address: 3850 BANANA RIVER BLVD
City-St-Zip: COCOA BEACH, FL 32931

Title: O () Delete
Name: KETTLE, JAN
Address: 2595 INGRAHAM ST.
City-St-Zip: SAN DIEGO, FL 92109

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

Title: O (X) Change () Addition
Name: SMITH, BETHANY
Address: 2595 INGRAHAM ST.
City-St-Zip: SAN DIEGO, FL 92109

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: BETHANY SMITH

O

02/14/2006

Electronic Signature of Signing Officer or Director

Date