

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003259

FILED  
May 15, 2012  
Secretary of State

**Entity Name:** OLD SALT FISHING FOUNDATION, INC.

**Current Principal Place of Business:**

C/O JILL FORAKER  
7600 131ST STREET  
SEMINOLE, FL 33776

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8564  
MADEIRA BEACH, FL 33738

**New Mailing Address:**

**FEI Number:** 20-0961806

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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:** DP  
**Name:** VERDENSKY, THOMAS  
**Address:** 8034 BAYHAVEN DRIVE  
**City-St-Zip:** SEMINOLE, FL 33776

**Title:** VD  
**Name:** CASEY, DAN  
**Address:** 7551 141ST STREET  
**City-St-Zip:** SEMINOLE, FL 33776

**Title:** DS  
**Name:** FORAKER, JILL  
**Address:** 8034 BAYHAVEN DRIVE  
**City-St-Zip:** SEMINOLE, FL 33776

**Title:** D  
**Name:** REED, DAVE  
**Address:** 541 LILLIAN DRIVE  
**City-St-Zip:** MADEIRA BEACH, FL 33708

I hereby 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 all other like empowered.

**SIGNATURE:** JILL FORAKER

DS

05/15/2012

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

\_\_\_\_\_  
Date