

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004024

FILED
Jan 16, 2009
Secretary of State

Entity Name: ISABELA OCEANOGRAPHIC INSTITUTE, INC.

Current Principal Place of Business:

24 MANGROVE LANE
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

24 MANGROVE LANE
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 83-0454800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BESSERER, JOHANN O
24 MANGROVE LANE
KEY LARGO, FL 33037 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: PRES () Delete
Name: BESSERER, JOHANN O
Address: 24 MANGROVE LANE
City-St-Zip: KEY LARGO, FL 33037 US

Title: CHAI () Delete
Name: KEENE MELTZOFF, SARAH
Address: 152 NE 93RD STREET
City-St-Zip: MIAMI, FL 33138 US

Title: TREA () Delete
Name: RAND, ROBERTA Y
Address: 200 OCEAN LANE DRIVE #203
City-St-Zip: KEY BISCAWAYNE, FL 33149 US

Title: SECR () Delete
Name: FEINGOLD, JOSHUA
Address: 13801 SW 26TH STREET
City-St-Zip: DAVIE, FL 33325 US

Title: DIR () Delete
Name: GALARZA, VICTOR P
Address: 848 BRICKELL KEY DRIVE # 3302
City-St-Zip: MIAMI, FL 33131 US

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:

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: JOHANN BESSERER

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date