

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011619

FILED
Mar 18, 2009
Secretary of State

Entity Name: TOM WALLIN MEMORIAL REEF FUND, INC.

Current Principal Place of Business:

8470 ENTERPRISE CIRCLE
SUITE 201
BRADENTON, FL 34202 US

New Principal Place of Business:

4828 OCEAN BLVD
SARASOTA, FL 34242 US

Current Mailing Address:

8470 ENTERPRISE CIRCLE
SUITE 201
BRADENTON, FL 34202 US

New Mailing Address:

4828 OCEAN BLVD
SARASOTA, FL 34242 US

FEI Number: 20-5845298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PFLUGNER, J GEOFFREY
8470 ENTERPRISE CIRCLE
SUITE 201
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

WALLIN, LINDA F
4828 OCEAN BLVD
SARASOTA, FL 34242 US

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: LINDA F WALLIN

03/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WALLIN, LINDA
Address: 8470 ENTERPRISE CIRCLE, SUITE 201
City-St-Zip: BRADENTON, FL 34202

Title: DVP () Delete
Name: WALLIN, BRETT
Address: 8470 ENTERPRISE CIRCLE, SUITE 201
City-St-Zip: BRADENTON, FL 34202

Title: DTS () Delete
Name: PFLUGNER, J. GEOFFREY
Address: 8470 ENTERPRISE CIRCLE, SUITE 201
City-St-Zip: BRADENTON, FL 34202

Title: D () Delete
Name: OLIVA, DINO
Address: 8470 ENTERPRISE CIRCLE, SUITE 201
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WALLIN, LINDA
Address: 4828 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34202

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: LINDA F WALLIN

DP

03/18/2009

Electronic Signature of Signing Officer or Director

Date