

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013142

FILED  
Feb 08, 2008  
Secretary of State

Entity Name: FEDERAL OVERSIGHT REFORM INC.

## Current Principal Place of Business:

40 FLAMINGO RD NORTH  
ROSLYN, NY 11576 US

## New Principal Place of Business:

3202 SERENITY COURT  
UNIT # 202  
NAPLES, FL 34114 US

## Current Mailing Address:

155 OFFICE PLAZA DRIVE  
SUITE A  
TALLAHASSEE, FL 32301 US

## New Mailing Address:

3202 SERENITY COURT  
UNIT # 202  
NAPLES, FL 34114 US

FEI Number: 20-8121000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES, LLC  
155 OFFICE PLAZA DRIVE  
SUITE A  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

RAND, DAVID S P  
3202 SERENITY COURT  
UNIT #202  
NAPLES, FL 34114 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: DAVID RAND

02/08/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAND, DAVID  
Address: 40 FLAMINGO ROAD NORTH  
City-St-Zip: ROSLYN, NY 11576 US

Title: S ( ) Delete  
Name: GLEICHER, BARBARA  
Address: 66 MIDWOOD CROSS  
City-St-Zip: ROSLYN, NY 11576 US

Title: T ( ) Delete  
Name: OCHTERA, MARGARET A  
Address: 606 NW SAN REMO CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: D ( ) Delete  
Name: RAND, DAVID  
Address: 40 FLAMINGO ROAD NORTH  
City-St-Zip: ROSLYN, NY 11576 US

Title: D ( ) Delete  
Name: GLEICHER, BARBARA  
Address: 66 MIDWOOD CROSS  
City-St-Zip: ROSLYN, NY 11576 US

Title: D ( ) Delete  
Name: OCHTERA, MARGARET A  
Address: 606 NW SAN REMO CIRCLE  
City-St-Zip: PORT ST. LUCIE, FL 34986 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RAND, DAVID S  
Address: 3202 SERENITY COURT #202  
City-St-Zip: NAPLES, FL 34114 US

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: DAVID RAND

P

02/08/2008

Electronic Signature of Signing Officer or Director

Date