2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013142

Entity Name: FEDERAL OVERSIGHT REFORM INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
3202 SERENITY COURT UNIT # 202 NAPLES, FL 34114 US			1060 BORGHESE UNIT # 1601 NAPLES, FL 3411		
Current Mailing Address:				New Mailing Address:	
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3202 SERENITY COURT UNIT # 202 NAPLES, FL 34114 US			UNIT # 1601	1060 BORGHESE LANE UNIT # 1601 NAPLES, FL 34114 US	
FEI Number:	: 20-8121000	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
UNIT #202 NAPLES, I	ENITY COURT ? FL 34114 US	whmite this etatement for the pu	urnoso of changing its regist	orad office or registered agent, or both	
	e of Florida.	abilits tills statement for the pt	inpose of changing its regist	ered office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Ager	nt	Date	
OFFICERS	S AND DIREC	rors:	ADDITIONS/CHAI	IGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () RAND, DAVID S 3202 SERENITY NAPLES, FL 34	COURT #202	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () GLEICHER, BAI 66 MIDWOOD (ROSLYN, NY 1	CROSS	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OCHTERA, MAF 606 NW SAN RI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () RAND, DAVID 40 FLAMINGO F ROSLYN, NY 1		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GLEICHER, BAI 66 MIDWOOD (ROSLYN, NY 1	CROSS	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OCHTERA, MAF 606 NW SAN RI		Title: Name: Address: Citv-St-7in:	() Change () Addition	

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 CEO 03/20/2009