

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

07 JUN -4 AM 8:01

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



05142007 REIN-NP CR2E099 (1/07)

<b>DOCUMENT # N07000004526</b> 1. Entity Name INTERNATIONAL OCEAN INSTITUTE USA INC.				
Principal Place of Business 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701		Mailing Address 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 3844 36th Terr S		
Suite, Apt. #, etc.		Suite, Apt. #, etc. # F		
City & State		City & State St Petersburg, FL		
Zip	Country	Zip 33711	Country USA	
4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable		
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent  RANDLE, DAVID W DR 3844 36TH TERR S #F ST PETERSBURG, FL 33711		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>				
<b>FILE NOW!!! FEE IS \$122.50</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, NOEL DR 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANDLE, DAVID W DR 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUFONE, MARIANNE 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIGOLIA, RUSADAN 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRAGER, ELLEN 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGEBRAKE, LARRY C 140 SEVENTH AVE SOUTH ST PETERSBURG, FL 33701	<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Andrew Maner 2801 Burlington Ave N St Petersburg, FL 33713	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
300104105843 06/08/07--01005--001 **122.50				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: <u>David W. Randle</u> David W. Randle		Date: <u>5/28/07</u> 727 3886675		