

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005994

FILED
Apr 30, 2009
Secretary of State

Entity Name: SHARK PROTECTION AND PRESERVATION ASSOCIATION INC

Current Principal Place of Business:

191 PRESCOTT J
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4552
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

191 PRESCOTT J
DEERFIELD BEACH, FL 33442 US

FEI Number: 26-0387331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTBRANDT, BARBARA H
191 PRESCOTT J
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

ALTBRANDT, BARBARA H BARBARA
191 PRESCOTT J
APT. #724
DEERFIELD BEACH, FL 33442 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: BARBARA ALTBRANDT

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARKS, MARK A
Address: PO BOX 4552
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: T () Delete
Name: ALTBRANDT, BARBARA H
Address: 191 PRESCOTT J
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: S () Delete
Name: KATHLEEN, MOON
Address: PO BOX 5082, 71284 HIGHWAY 83
City-St-Zip: SWAN LAKE, MT 59911 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARKS, MARK A BARBARA
Address: PO BOX 4552
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: T (X) Change () Addition
Name: ALTBRANDT, BARBARA H BARBARA
Address: 191 PRESCOTT J
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: S (X) Change () Addition
Name: KATHLEEN, MOON B BARBARA
Address: PO BOX 5082, 71284 HIGHWAY 83
City-St-Zip: SWAN LAKE, MT 59911 US

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: BARBARA ALTBRANDT

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date