

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010182

Entity Name: OHANA INSTITUTE, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

31 WINDWARD LANE
ROSEMARY BEACH, FL 32461

New Principal Place of Business:

114 KINGSTON ROAD
ROSEMARY BEACH, FL 32461

Current Mailing Address:

POB 611027
ROSEMARY BEACH, FL 32461

New Mailing Address:

PO BOX 611027
ROSEMARY BEACH, FL 32461

FEI Number: 26-1392844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGTORF, ALLEN
31 WINDWARD LANE
ROSEMARY BEACH, FL 32461 US

Name and Address of New Registered Agent:

BURGTORF, ALLEN
114 KINGSTON ROAD-
ROSEMARY BEACH, FL 32461 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:

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURGTORF, ALLEN
Address: PO BOX 611477
City-St-Zip: ROSEMARY BEACH, FL 32461

Title: D () Delete
Name: MCNAMARA, PAIGE
Address: 118 BRIDGETOWN AVE.
City-St-Zip: ROSEMARY BEACH, FL 32461

Title: D () Delete
Name: BURGTORF, ELIZABETH L.
Address: PO BOX 611477
City-St-Zip: ROSEMARY BEACH, FL 32461

Title: D () Delete
Name: MCNAMARA, TIMOTHY
Address: 118 BRIDGETOWN AVE.
City-St-Zip: ROSEMARY BEACH, FL 32461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALLEN BURGTORF

D

04/08/2009

Electronic Signature of Signing Officer or Director

Date