2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000521

FILED Mar 05, 2009 Secretary of State

Entity Name: SOUTHWEST FLORIDA MARINE AQUARIUM SOCIETY INC.

Current Principal Place of Business: New Principal Place of Business:

8209 HARRISBURG DRIVE 104 SEBRING CIRCLE FORT MYERS, FL 33967 LEHIGH ACRES, FL 33936

Current Mailing Address: New Mailing Address:

8209 HARRISBURG DRIVE PO BOX 62322

FORT MYERS, FL 33967 FORT MYERS, FL 33906

FEI Number: 26-1789113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TUCHBAUM, CRISTINA

8209 HARRISBURG DRIVE
FORT MYERS, FL 33967 US

DHUYVETTER, PAUL J
104 SEBRING CIRCLE
LEHIGH ACRES, FL 33936 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: PAUL J DHUYVETTER 03/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: P () Delete Title: P (X) Change () Addition

 Name:
 PRECHEL, MARCO
 Name:
 DHUYVETTER, PAUL J

 Address:
 8209 HARRISBURG DRIVE
 Address:
 104 SEBRING CIRCLE

 City-St-Zip:
 FORT MYERS, FL 33967
 City-St-Zip:
 LEHIGH ACRES, FL 33936

Title: S () Delete Title: VP (X) Change () Addition Name: SPETICH, SCOTT Name: SPETICH, SCOTT

 Name:
 SPETICH, SCOTT
 Name:
 SPETICH, SCOTT

 Address:
 8209 HARRISBURG DRIVE
 Address:
 13398 SYLVAN AVE

 City-St-Zip:
 FORT MYERS, FL 33967
 City-St-Zip:
 FORT MYERS, FL 33919

Title: T () Delete Title: TR (X) Change () Addition

 Name:
 TUCHBAUM, CRISTINA
 Name:
 UPESLACIS, ALAN

 Address:
 8209 HARRISBURG DRIVE
 Address:
 730 NEWELL ST.

 City-St-Zip:
 FORT MYERS, FL 33967
 City-St-Zip:
 LEHIGH ACRES, FL 33974

Title: () Delete Title: M DI () Change (X) Addition

 Name:
 Name:
 LINDENSMITH, RON

 Address:
 Address:
 1123 SW 41ST STREET

 City-St-Zip:
 City-St-Zip:
 CAPE CORAL, FL 33914

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: PAUL J DHUYVETTER PRES 03/05/2009