

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001333

FILED
May 08, 2009
Secretary of State

Entity Name: OPERATION OPEN ARMS, INC.

Current Principal Place of Business:

3624 BAYVIEW AVE.
ST. JAMES CITY, FL 33956

New Principal Place of Business:

3624 BAYVIEW AVENUE
ST. JAMES CITY, FL 33956

Current Mailing Address:

3624 BAYVIEW AVE.
ST. JAMES CITY, FL 33956

New Mailing Address:

PO BOX 101
ST. JAMES CITY, FL 33956

FEI Number: 33-1205084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUNCH, JOHN
3624 BAYVIEW AVE.
ST. JAMES CITY, FL 33956 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUNCH, JOHN
Address: 3624 BAYVIEW AVE.
City-St-Zip: ST. JAMES CITY, FL 33956

Title: D () Delete
Name: SUTER, DOUGLAS J ESQ.
Address: 250 E. BROAD ST., SUITE 900
City-St-Zip: COLUMBUS, OH 43215

Title: D (X) Delete
Name: EGGSPUEHLER-GUITTARD, CARI L
Address: 1529 GRAND AVE.
City-St-Zip: PACIFICA, CA 94944

Title: D () Delete
Name: MAHER, RALPH J
Address: 3299 WASHINGTON ST.
City-St-Zip: SAN FRANCISCO, CA 94115

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BUNCH, JOHN G
Address: 3624 BAYVIEW AVE.
City-St-Zip: ST. JAMES CITY, FL 33956

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: JOHN G BUNCH

PRES

05/08/2009

Electronic Signature of Signing Officer or Director

Date