2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N26458

FILED Oct 18, 2006 Secretary of State

Entity Name: FLORIDA KEYS MARINE SANCTUARY, INC.

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

LOOE KEY DIVE CENTER 27340 OVERSEAS HWY RAMROD KEY, FL 33042 US

Current Mailing Address: New Mailing Address:

P.O. BOX 664 P.O. BOX 4333

SUMMERLAND KEY, FL 33042 US KEY WEST, FL 33041 US

FEI Number: 65-0165734 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: Name and Address of New Registered Agent:

GLENN, JOSEPH P GLENN, JOSEPH P 1187 27 S US 1208 PINE ST.

PO BOX 64 KEY WEST, FL 33041 US

SUMMERLAND KEY, FL 33042 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: JOSEPH P. GLENN 10/18/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PRES (X) Change () Addition

 Name:
 GLENN, JOSEPH P
 Name:
 GLENN, JOSEPH P

 Address:
 PO BOX 664
 Address:
 PO BOX 4333

 City-St-Zip:
 SUMMERLAND KEY, FL 33042
 City-St-Zip:
 KEY WEST, FL 33041

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 NELSON, JAN
 Name:
 TAYLOR, CLARA

 Address:
 26015 ROOSELVELT BLVD
 Address:
 P.O. BOX 22

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33041

Title: D () Delete Title: D (X) Change () Addition

Name: DE VOR, MARVIN Name: NELSON, JAN

Address: PO BOX 664 Address: 2601 S. ROOSEVELT BLVD #3C

City-St-Zip: SUMMERLAND KEY, FL 33042 City-St-Zip: KEY WEST, FL 33040

Title: D (X) Delete Title: () Change () Addition

 Name:
 NELSON, JAN
 Name:

 Address:
 2601 S ROOSUECES BLVD UNIT 3C
 Address:

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH P. GLENN PRES 10/18/2006

Electronic Signature of Signing Officer or Director

Date