

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90184 005 ****61.25

DOCUMENT # N26523

1. Entity Name

OCEAN WATCH FOUNDATION, INC.

Principal Place of Business

P.O. BOX 462
 FT. LAUDERDALE FL 33302

Mailing Address

P.O. BOX 462
 FT. LAUDERDALE FL 33302

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0071849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KACZMAREK, JOHN C ESQ.
370 W CAMINO GARDENS BOULEVARD
SUITE 200B
BOCA RATON FL 33432

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DT** ☐ Delete
 NAME **BURNS, DEBBIE**
 STREET ADDRESS **1644 NE 33 ST**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33334**

TITLE **DT** ☒ Change ☐ Addition
 NAME **Debbie Burns**
 STREET ADDRESS **1308 SE 1 st**
 CITY-ST-ZIP **Pom. Bch. FL. 33060**

TITLE **D** ☐ Delete
 NAME **WATSON, NEAL**
 STREET ADDRESS **1525 S ANDREWS AVE #215**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33316**

TITLE **Linda F Cassidy** ☐ Change ☒ Addition
 NAME **Linda F Cassidy**
 STREET ADDRESS **130 Cypress Club Dr**
 CITY-ST-ZIP **# 331 Pompano Bch. FL. 33060**

TITLE **P** ☐ Delete
 NAME **WOODHOUSE, LINDA**
 STREET ADDRESS **1003 SE 5TH CT**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **KACZMAREK, JOHN C**
 STREET ADDRESS **370 W CAMINO GARDENS BOULEVARD STE 200B**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** ☐ Delete
 NAME **CIUCEVICH, JULIE**
 STREET ADDRESS **215 NW 25TH ST, #10**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33311**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DVP** ☐ Delete
 NAME **CASSIDY, KEN**
 STREET ADDRESS **130 CYPRESS CLUB DRIVE UNIT 331**
 CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 23, 2001 **760-5307**
 Date Daytime Phone #

CR2E037 (10/00)