2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26523

FILED Apr 29, 2008 Secretary of State

Entity Name: OCEAN WATCH FOUNDATION, INC.

Entity Nar	ne: OCEAN V	VATCH FOUNDATION, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX 5494 LIGHTHOUSE POINT, FL 33074			2457 E COMMERCIA FORT LAUDERDALE		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX (LIGHTHOL	5494 JSE POINT, FL	. 33074			
FEI Number:	65-0071849	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
SUITE 200 BOCA RAT The above	B ΓΟΝ, FL 33432 named entity s e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,	
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CIVCECICH, JU 215 NW 25 ST #		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SENNA, DOMIN	L HIGHWAY #304	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ANTOINE, MAR' 2201 SE 9TH S' POMPANO BEA	Г#103	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GIBSON, JENNI 5300 NW 55 BL COCONUT CRE	VD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () DANIELS, ANDF 2457 E. COMMI FT. LAUDERDA	ERCIAL BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ANDREW E DANIELS TRES 04/29/2008