

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48204

FILED
Jul 07, 2007
Secretary of State

Entity Name: CETACEAN LOGIC FOUNDATION, INC.

Current Principal Place of Business:

109 ESTHER STREET
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

109 ESTHER STREET
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-3141088 **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:

MARSHALL, FRANK E III
109 ESTHER STREET
NEW SMYRNA BEACH, FL 32169 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARSHALL, FRANK E III
Address: 340 NORTH CAUSEWAY
City-St-Zip: NEW SMYRNA BEACH, FL

Title: D () Delete
Name: BAYER, DENNIS K
Address: 150 MAGNOLIA AVENUE
City-St-Zip: DAYTONA BEACH, FL

Title: D () Delete
Name: BIDGOOD, LEE JR
Address: 310 QUAY ASSISI
City-St-Zip: NEW SMYRNA BEACH, FL

Title: D () Delete
Name: STEWART, E. ALLEN III
Address: 3300 S.W. 34TH AVE.
City-St-Zip: OCALA, FL 32674

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FRANK E. MARSHALL III

PRES

07/07/2007

Electronic Signature of Signing Officer or Director

Date