

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50619

FILED
Jan 20, 2009
Secretary of State

Entity Name: OSTEGO BAY ENVIRONMENTAL RESPONSE COOPERATIVE, INC.

Current Principal Place of Business:

718 FISHERMAN'S WHARF
FT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

1130 MAIN ST.
FT. MYERS BCH., FL 33931 US

New Mailing Address:

FEI Number: 65-0307348 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOANNE SEMMER
792 OAK ST
FORT MYERS BEACH, FL 33931 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: SEMMER, JOANNE E.
Address: 792 OAK STREET
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D () Delete
Name: WALDRON, NEUTON
Address: 3681 SOUTH ROAD
City-St-Zip: N FORT MYERS, FL 33914

Title: D () Delete
Name: SEMMER, WILLIAM S.,
Address: 1130 MAIN ST.
City-St-Zip: FT MYERS BEACH, FL

Title: D () Delete
Name: ERICKSON, GRANT
Address: PO BOX 2552 1100 SHRIMP BOAT LANE
City-St-Zip: FORT MYERS BEACH, FL 33931

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: JOANNE SEMMER

D

01/20/2009

Electronic Signature of Signing Officer or Director

Date