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FILED

Mar 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000001740 (9)

1. Corporation Name

OCEAN REEF CHAPEL FOUNDATION, INC.



Principal Place of Business

Mailing Address

32 OCEAN REEF DRIVE
KEY LARGO FL 33037
US32 OCEAN REEF DRIVE
KEY LARGO FL 33037-5222
US3. Date Incorporated or Qualified
04/08/19943a. Date of Last Report
03/14/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
65-0486471Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NOSTRO, LOUIS
201 S. BISCAYNE BLVD.
SUITE 1800
MIAMI FL 33131

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Nancy Tod*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/25/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☒ DELETE
NAME	DAENZER, BERNARD	
STREET ADDRESS	23 OCEAN REEF DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	VDx	☒ DELETE
NAME	TOD, NANCY	
STREET ADDRESS	23 OCEAN REEF DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	VD	☒ DELETE
NAME	KREITLER, JACK	
STREET ADDRESS	23 OCEAN REEF DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	SD	☒ DELETE
NAME	BLACKLIDGE, MARIAN	
STREET ADDRESS	23 OCEAN REEF DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	TD	☒ DELETE
NAME	KLEPPER, ROBERT	
STREET ADDRESS	23 OCEAN REEF DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	VP/TD	☒ Change ☐ Addition
1.2 NAME	GARDNER, JAMES	
1.3 STREET ADDRESS	19 DOLPHIN LANE	
1.4 CITY-ST-ZIP	KEY LARGO, FL 33037	
2.1 TITLE	PD	☒ Change ☐ Addition
2.2 NAME	TOD, NANCY	
2.3 STREET ADDRESS	3 SUNSET CAY	
2.4 CITY-ST-ZIP	KEY LARGO, FL 33037	
3.1 TITLE	SD	☒ Change ☐ Addition
3.2 NAME	SWENSON, JEANNIE	
3.3 STREET ADDRESS	35 ISLAND DRIVE	
3.4 CITY-ST-ZIP	KEY LARGO, FL 33037	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: NANCY TOD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/97

Date

305-367-2226

Daytime Phone # 0024412

CR2E037 (9/96)