

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90105 010 ****61.25

DOCUMENT # N94000004259
 1. Entity Name
OCEAN REEF COMMUNITY FOUNDATION, INC.

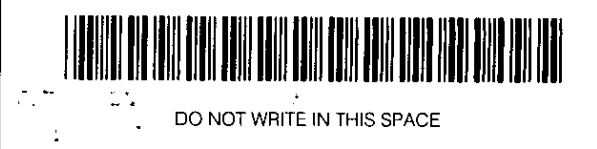
Principal Place of Business 200 ANCHOR DRIVE KEY LARGO FL 33037 US	Mailing Address 24 DOCKSIDE LANE #98 KEY LARGO FL 33037 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 65-0509255	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

NOSTRO, LOUIS
201 S. BISCAYNE BLVD.
SUITE 1600
MIAMI FL 33131

7. Name and Address of New Registered Agent

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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ARONOFF, GEORGE <input type="checkbox"/> Delete 200 ANCHOR DRIVE KEY LARGO FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DAVIDSON, TOM <input type="checkbox"/> Delete 200 ANCHOR DRIVE KEY LARGO FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOLDSTEIN, ALAN <input type="checkbox"/> Delete 200 ANCHOR DRIVE KEY LARGO FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHIPLEY, SHIRLEY <input type="checkbox"/> Delete 200 ANCHOR DRIVE KEY LARGO FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT RITZ, DAVID <input type="checkbox"/> Delete 200 ANCHOR DRIVE KEY LARGO FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TAUBENSEE, SHIRLEY <input type="checkbox"/> Delete 200 ANCHOR DRIVE KEY LARGO FL 33037

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* **REQUIRE** David C. Ritz, Asst. Treasurer 01-31-02 367-3067 (305)

CR2E037 (9/01)