

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90246 005 ****61.25

DOCUMENT # N94000004259

1. Entity Name
OCEAN REEF FOUNDATION, INC.



Principal Place of Business
**200 ANCHOR DRIVE
KEY LARGO, FL 33037 US**

Mailing Address
**200 ANCHOR DR.
HOMESTEAD, FL 33039 US**

20044437



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Key Largo

Zip

Country

Zip

FL

Country
US

04142005 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0509255

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME TAYLOR, JOHN N
STREET ADDRESS 200 ANCHOR DRIVE
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME DAVIDSON, TOM
STREET ADDRESS 200 ANCHOR DRIVE
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CD ☐ Delete
NAME GOLDSTEIN, ALAN
STREET ADDRESS 200 ANCHOR DRIVE
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME SHIPLEY, SHIRLEY
STREET ADDRESS 200 ANCHOR DRIVE
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☒ Delete
NAME RITZ, DAVID
STREET ADDRESS 200 ANCHOR DRIVE
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME MICHNO, ROSE
STREET ADDRESS 200 ANCHOR DRIVE
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Rose Michno
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/20/05 305-367-4207
Daytime Phone #