

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004259

FILED
Apr 03, 2009
Secretary of State

Entity Name: OCEAN REEF FOUNDATION, INC.

Current Principal Place of Business:

200 ANCHOR DRIVE
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

200 ANCHOR DR.
KEY LARGO, FL 33037 US

New Mailing Address:

200 ANCHOR DRIVE
KEY LARGO, FL 33037 US

FEI Number: 65-0509255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOSTRO, LOUIS
201 S. BISCAYNE BLVD.
SUITE 1600
MIAMI, FL 33131 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: PD () Delete
Name: TAYLOR, JOHN N
Address: 200 ANCHOR DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: VD () Delete
Name: DAVIDSON, TOM
Address: 200 ANCHOR DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: CD () Delete
Name: GOLDSTEIN, ALAN
Address: 200 ANCHOR DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: TD () Delete
Name: GOLDSMITH, BARRY
Address: 200 ANCHOR DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: S () Delete
Name: MICHNO, ROSE
Address: 200 ANCHOR DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: S () Change (X) Addition
Name: MIKOLAY, YURIANNA C
Address: 200 ANCHOR DRIVE
City-St-Zip: KEY LARGO, FL 33037

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: JOHN TAYLOR

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date