

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001600

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: NATIONAL MARINE INSTITUTE, INC.

**Current Principal Place of Business:**

3135 E ATLANTIC BLVD  
POMPANO BEACH, FL 33062 US

**New Principal Place of Business:**

**Current Mailing Address:**

3135 E ATLANTIC BLVD  
POMPANO BEACH, FL 33062 US

**New Mailing Address:**

FEI Number: 65-0648011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KNEEN, JEFFREY D  
LEVY, KEEN, MARIANI, CURTIN  
1400 CENTREPARK BLVD., STE. 1000  
WEST PALM BEACH, FL 33401 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: KAMERLING, FRANK A  
Address: 2921 NE 48TH STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D ( ) Delete  
Name: KAMERLING, CAROLE  
Address: 2921 NE 48TH STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D ( ) Delete  
Name: PICCIOLO, LINDA L  
Address: 2537 TORTUGAS LANE  
City-St-Zip: FORT LAUDERDALE, FL 33312

**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:

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: LINDA L. PICCIOLO

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date