2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002238

Entity Name: OCEAN PATHS CORPORATION

FILED Feb 15, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

609 ALDEN PLACE 311 SUNSET BLVD

MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951

Current Mailing Address: New Mailing Address:

609 ALDEN PLACE 311 SUNSET BLVD

MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951

FEI Number: 59-3405070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARMICHAEL, RANDY HAMILTON, TAMARA M 609 ALDEN PLACE 311 SUNSET BLVD.

MELBOURNE BEACH, FL 32951 US MELBOURNE BEACH, FL 32951 US

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: TAMARA M. HAMILTON 02/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name:CARMICHAEL, RANDYName:HAMILTON, TAMARA MAddress:609 ALDEN PLAddress:311 SUNSET BLVD.City-St-Zip:MELBOURNE BCH, FL 32951City-St-Zip:MELBOURNE BCH, FL 32951

Title: VD () Delete Title: () Change () Addition Name: HEUER, JUSTIN Name:

Address: 306 BEAUJEAN AVENUE Address: City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 RICKE, WILLIAM H
 Name:

 Address:
 603 ALDEN PLACE
 Address:

 City-St-Zip:
 MELBOURNE BEACH, FL 32951
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TAMARA M. HAMILTON DIR 02/15/2006