2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N98000003089

Entity Name: OCEAN REEF CULTURAL CENTER, INC.

Current Principal Place of Business:

200 ANCHOR DRIVE
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

200 ANCHOR DRIVE
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-0483801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUNT, JOHN
200 ANCHOR DRIVE
KEY LARGO, FL 33037 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: C ( ) Delete
Name: GOLDSTEIN, ALAN
Address: 5 CANNON POINT
City-St-Zip: KEY LARGO, FL 33037

Title: D ( ) Delete
Name: FARMER, RICHARD
Address: 2 SUNRICE CAY RD
City-St-Zip: KEY LARGO, FL 33037

Title: D ( ) Delete
Name: DAVIDSON, THOMAS
Address: 7 SUNRISE SAY RD
City-St-Zip: KEY LARGO, FL 33037

Title: D ( ) Delete
Name: OLCOTT, BARBARA
Address: 09 CARD SOUND RD
City-St-Zip: KEY LARGO, FL 33037

Title: D ( ) Delete
Name: PASL, ASTBURY
Address: 35 OCEAN REEF DR
City-St-Zip: KEY LARGO, FL 33037

Title: D ( ) Delete
Name: RITZ, DAVID
Address: 200 ANCHOR DR
City-St-Zip: KEY LARGO, FL 33037

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: D (X) Change ( ) Addition
Name: PAUL, ASTBURY
Address: 35 OCEAN REEF DR
City-St-Zip: KEY LARGO, FL 33037

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: ALAN GOLDSTEIN MR. 04/29/2008

Electronic Signature of Signing Officer or Director — Date