2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# P03000097417

Entity Name: ATLANTIC COAST VENTURE INVESTMENTS INC.

Current Principal Place of Business:

6001 TROPHY DR UNIT 1002
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

PO BOX 111631
NAPLES, FL 34108

New Mailing Address:

FEI Number: 35-2216753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

O'KELLEY, RONALD L
6001 TROPHY DR UNIT 1002
NAPLES, FL 34110 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CCEO ( ) Delete
Name: O'KELLEY, RONALD L
Address: 6001 TROPHY DR UNIT 1002
City-St-Zip: NAPLES, FL 34110

Title: PD ( ) Delete
Name: O'KELLEY, LESLEY B
Address: 6001 TROPHY DRIVE UNIT 1002
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: O'KELLEY, JOANNA C
Address: 3155 20TH ST N
City-St-Zip: ARLINGTON, VA 22201

Title: D ( ) Delete
Name: O'KELLEY, GILLIAN E
Address: 6001 TROPHY DRIVE #1002
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: O'KELLEY, PENNY M
Address: 1021 N. GARFIELD STREET #521
City-St-Zip: ARLINGTON, VA 22201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: O'KELLEY, JOANNA C
Address: 851 GLEBE ROAD #510
City-St-Zip: ARLINGTON, VA 22203

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD L OKELLEY CCEO 04/21/2008

Electronic Signature of Signing Officer or Director — Date