2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059650

Entity Name: OCEAN RESTORATION CORPORATION

FILED Jan 31, 2008 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Pla	New Principal Place of Business:	
17101 CAPTIVA DR				17101 CAPTIVA DR	
GUEST HOUSE CAPTIVA, FL 33924			GH CAPTIVA, FL 3392	GH CAPTIVA, FL 33924	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
P.O. BOX CAPTIVA,	1111 FL 33924				
FEI Number:	: 20-0982458	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and Addres	s of New Registered Agent:	
SANIBEL,	IWINKLE WA` FL 33957	US			
	e named entity e of Florida.	submits this statement for the pi	urpose of changing its regist	ered office or registered agent, or both,	
SIGNATUF	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address: City-St-Zip:	DPST (CALINSKI, MIC PO BOX 1111 CAPTIVA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D (JONES, HERB 16420 OLD US FT MYERS, FL	5 41	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	JONES, MICHA 23375 OLDE N) Delete AEL T MEADOWBROOK CIRCLE NGS, FL 34134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	FOSE, GREGO	RITTANY BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D (CHURCH, DEN 2844 MARLED MADISON, WI	GE ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MIKE CALINSKI P 01/31/2008