2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059650

Entity Name: OCEAN RESTORATION CORPORATION

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17101 CAPTIVA DR GH CAPTIVA, FL 33924 **Current Mailing Address: New Mailing Address:** P.O. BOX 1111 CAPTIVA, FL 33924 FEI Number: 20-0982458 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: PHOENIX, CHARLES PT ESQ 12800 UNIVERSITY DRIVE SUITE 260 FT MYERS, FL 33907 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPST () Delete Title: () Change () Addition CALINSKI, MICHAEL D Name: Name: PO BOX 1111 Address: Address: City-St-Zip: CAPTIVA, FL 33924 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: JONES, HERBERT S Name: WEBSTER, STEVEN PO BOX 542111 16420 OLD US 41 Address: Address: FT MYERS, FL 33912 US MERRIT ISLAND, FL 32954 US City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: D JONES, MICHAEL T JONES, MICHAEL T Name: Name: 23375 OLDE MEADOWBROOK CIRCLE 23375 OLDE MEADOWBROOK CIRCLE Address: Address: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 US City-St-Zip: Title: () Delete Title: (X) Change () Addition FOSE, GREGG FOSE, GREGG Name: Name: Address: 12730 NEW BRITTANY BLVD. Address: 12730 NEW BRITTANY BLVD. City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: FT. MYERS, FL 33907 US Title: Title: (X) Change () Addition () Delete CHURCH, DENNIS CHURCH, DENNIS Name: Name: 2844 MARLEDGE ST. Address: 2844 MARLEDGE ST. Address: City-St-Zip: MADISON, WI 53711 City-St-Zip: MADISON, WI 53711 US Title: () Delete Title: () Change (X) Addition Name: Name: COOPER, JOEL Address: Address: 5821 DORY WAY City-St-Zip: City-St-Zip: TAMPA, FL 33651 US

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 PRES 01/13/2009