2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000150354

Entity Name: OCCUPATIONAL RESOURCES, INC.

FILED Apr 07, 2008 Secretary of State

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

1545 FLEETWOOD DRIVE 5686 BURNSIDE CIRCLE SARASOTA, FL 342323315 TALLAHASEE, FL 32312

Current Mailing Address: New Mailing Address:

1545 FLEETWOOD DRIVE 5686 BURNSIDE CIRCLE SARASOTA, FL 342323315 TALLAHASSEE, FL 32312

FEI Number: 56-2543375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

TOLSMA, NANCY L
1545 FLEETWOOD DRIVE
SARASOTA, FL 342323315 US

TOLSMA, NANCY L
5686 BURNSIDE CIRCLE
TALLAHASSEE, FL 32312 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: 04/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 TOLSMA, NANCY L
 Name:
 TOLSMA, NANCY L

 Address:
 1545 FLEETWOOD DRIVE
 Address:
 5686 BURNSIDE CIRCLE

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 TALLAHASSEE, FL 32312

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: NANCY L. TOLSMA PRES 04/07/2008