2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000111061

Entity Name: OCM, INC.

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
2128 E EC STE 301	GEWOOD DR	2	5121 S LAKELAND DR STE 1		
	D, FL 33803	US	LAKELAND, FL 33813	US	
Current Mailing Address:			New Mailing Address:		
	GEWOOD DR	2	5121 S LAKELAND DR		
STE 301 LAKELANI	D, FL 33803	US	STE 1 LAKELAND, FL 33813	US	
FEI Number	: 51-0602702	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:		
5651 OAK	CK, BRIAN J WOOD KNOLI D, FL 33811	_ DR US			
The above in the State	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI					
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () ORBEGOSO, J 1864 STELLA (LAKELAND, FL	CT S	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () ORBEGOSO, C 1864 STELLA (LAKELAND, FL	CT S	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	S () FREDERICK, E 5651 OAKWOO LAKELAND, FL	DD KNOLL DR	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	T () FREDERICK, N) Delete //ELISSA O	Title: (Name:) 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.

Address:

City-St-Zip:

SIGNATURE: BRIAN FREDERICK S 02/02/2009

5651 OAKWOOD KNOLL DR

LAKELAND, FL 33811 US

Address:

City-St-Zip: