

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25789

FILED
Feb 23, 2009
Secretary of State

Entity Name: DRIFTWOOD ON THE OCEAN CORPORATION

Current Principal Place of Business:

ONE CHURCH ST.
WEBSTER, MA 015702502

New Principal Place of Business:

Current Mailing Address:

ONE CHURCH ST.
WEBSTER, MA 015702502

New Mailing Address:

FEI Number: 04-3059368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: SCHMIDT, DEBORAH,
Address: 112 BUCKINGHAM RD.
City-St-Zip: PITTSBURGH, PA 15215

Title: VTD (X) Delete
Name: DUPONT, EMILE N.,
Address: 19 NEGUS ST.
City-St-Zip: WEBSTER, MA 01570

Title: S () Delete
Name: DUPONT, WILLIAM N.,
Address: 160 W. MAIN ST.
City-St-Zip: DUDLEY, MA 01571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHMIDT, DEBORAH,
Address: 112 BUCKINGHAM RD.
City-St-Zip: PITTSBURGH, PA 15215

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

Title: TSD (X) Change () Addition
Name: DUPONT, WILLIAM N.,
Address: 160 W. MAIN ST.
City-St-Zip: DUDLEY, MA 01571

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: WILLIAM DUPONT

Electronic Signature of Signing Officer or Director

TSD

02/23/2009

Date