

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38074

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** OCEAN CONSERVANCY, INC.

**Current Principal Place of Business:**

1300 19TH ST., N.W., 8TH FLOOR  
WASHINGTON, DC 20036 US

**New Principal Place of Business:**

**Current Mailing Address:**

1300 19TH ST., N.W., 8TH FLOOR  
WASHINGTON, DC 20036 US

**New Mailing Address:**

**FEI Number:** 23-7245152

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRISTY, TAVANO  
449 CENTRAL AVE.  
SUITE 200  
ST PETERSBURG, FL 33701 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

**OFFICERS AND DIRECTORS:**

**Title:** C  
**Name:** BOHLEN, CURTIS  
**Address:** 4710 QUEBEC STREET, NW  
**City-St-Zip:** WASHINGTON, DC 20016 US

**Title:** VC  
**Name:** ROBINSON, BARBARA PAUL  
**Address:** 350 CENTRAL PARK WEST  
**City-St-Zip:** NEW YORK, NY 10025 US

**Title:** SD  
**Name:** STEVEN, MOORE E  
**Address:** 47 VIEW STREET  
**City-St-Zip:** LOS ALTOS, CA 94022 US

**Title:** PD  
**Name:** SPRUILL, VIKKI N  
**Address:** 1300 19TH STREET, NW 8TH FLOOR  
**City-St-Zip:** WASHINGTON, DC 20036 US

**Title:** TD  
**Name:** PURCELL, PATRICK  
**Address:** 1449 CAPRI DRIVE  
**City-St-Zip:** PACIFIC PALISADES, CA 90272 US

**Title:** CFO  
**Name:** ARMON, LAWRENCE  
**Address:** 1300 19TH STREET NW 8TH FLOOR  
**City-St-Zip:** WASHINGTON, DC 20036

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** LAWRENCE J. ARMON

CFO

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date