

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000030005

FILED
Apr 30, 2009
Secretary of State

Entity Name: OCEAN COMMUNICATIONS, INC.

Current Principal Place of Business:

560 VILLAGE BOULEVARD, SUITE 250
BRANDYWINE II
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

560 VILLAGE BOULEVARD, SUITE 250
BRANDYWINE II
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0739643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOHLER, THOMAS
560 VILLAGE BOULEVARD, SUITE 250
BRANDYWINE II
WEST PALM BEACH, FL 33409 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: D () Delete
Name: MOHLER, THOMAS
Address: 560 VILLAGE BLVD STE 250
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D () Delete
Name: SWORDS, CIARAN P
Address: 4601 NW 27TH AVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: THOMAS MOHLER

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date