2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000052350

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

OCEAN FIRST, INC.

Principal Place of Business	Mailing Address

2. Principal Place of Business	3. Mailing Address
4400 N. Federal Highway	1445 Wampanoag Trail
Suite, Apt. #, etc.: 210-05	Suite, Apt. #, etc.: 202
City & State: Boca Raton, FL	City & State: East Providence, RI
Zip: 33431 Country:	Zip: 02915 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0936828 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Guarino, Fred 9001 NW 97 Terrace, Unit E Medley, FL 33178	Name: Coutu, Robert G. Street Address (P.O. Box Number is Not Acceptable): 4400 N. Federal Highway Suite 210-05 City: Boca Raton FL Zip Code: 33431

8. 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 _____ 9/10/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW and pay $150.00
After MAY 1, 2001 fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
		Director Coutu, Robert G. 4400 N. Federal Highway, Ste. 210-05 Boca Raton, FL 33431	
	☐ Delete		☐ Change ☐ Addition
		Director Guarino, Fred 1445 Wampanoag Trail East Providence, RI 02915	
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
REINSTATEMENT 2000	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

CR2E034 (11/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 8/17/01 401-457-0808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #