


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90169 001 ****61.25

DOCUMENT # N21646

1. Entity Name
NATIONAL SAVE THE SEA TURTLE FOUNDATION, INC.



Principal Place of Business
4419 W. TRADEWINDS AVE
FT. LAUDERDALE, FL 33308 US

Mailing Address
4419 W. TRADEWINDS AVE
FT. LAUDERDALE, FL 33308 US

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01232006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2828707

Applied For
 Not Applicable

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



6. Name and Address of Current Registered Agent
WOJCIK, FRANK P.
3617 NE 23 AVE.
FT. LAUDERDALE, FL 33308

7. Name and Address of New Registered Agent
 Name **WOJCIK, FRANK P.**
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WOJCIK, FRANK P.	
STREET ADDRESS	3617 NE 23 AVE.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	YOUNG, JOHN	
STREET ADDRESS	2301 SE 17 ST.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE	C	
NAME	NELSON, JAN	
STREET ADDRESS	4701 N. FEDERAL HWY.	
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064	
TITLE	D	<input type="checkbox"/> Delete
NAME	WOJCIK, JUDITH A.	
STREET ADDRESS	3617 NE 23RD AVE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308	
TITLE	D	<input type="checkbox"/> Delete
NAME	Joyce T. Stewart	
STREET ADDRESS	289 E. Oakland Park Blvd.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33334	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOJCIK, FRANK P.	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	13905 SE 94th CT.	
CITY-ST-ZIP	Summerfield, FL 34491	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOJCIK, JUDITH A.	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D Joyce T. Stewart	
STREET ADDRESS	289 E. Oakland Park Blvd.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33334	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **FRANK P. Wojcik** 4/25/06 (954) 351-9333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #