

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000129134

**Entity Name:** OCEAN DREAMER ADVENTURES INC.

**Current Principal Place of Business:**

C/O STEPHANIE SNOW  
15 NORTH OCEAN DR  
KEY LARGO, FL 33037

**Current Mailing Address:**

C/O STEPHANIE SNOW  
15 NORTH OCEAN DR  
KEY LARGO, FL 33037

**FEI Number:** 26-2394807

**Certificate of Status Desired:** No

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

WILSON, M MARIE ATTY  
2383 TAMiami TRAIL SOUTH  
STE A  
VENICE, FL 34293 US

*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

**Officer/Director Detail :**

Title D  
Name ROGERS, MICHAEL  
Address 15 NORTH OCEAN DR  
City-State-Zip: KEY LARGO FL 33037

Title D  
Name SNOW, STEPHANIE  
Address 15 NORTH OCEAN DR  
City-State-Zip: KEY LARGO FL 33037

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

**SIGNATURE:** STEPHANIE SNOW

**PRESIDENT**

**01/16/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date