2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38074

FILED Mar 12, 2009 Secretary of State

Entity Name: OCEAN CONSERVANCY, INC.

Current Principal Place of Business: New Principal Place of Business: 1300 19TH ST., N.W., 8TH FLOOR WASHINGTON, DC 20036 **Current Mailing Address: New Mailing Address:** 1300 19TH ST., N.W., 8TH FLOOR WASHINGTON, DC 20036 FEI Number: 23-7245152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHITE, DAVID 449 CENTRAL AVE. SUITE 200 ST PETERSBURG, FL 33701 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BOHLEN, CURTIS DIR. Name: Name: 4710 QUEBEC STREET, NW Address: Address: City-St-Zip: WASHINGTON, DC 20016 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ROBINSON, BARBARA PAUL SD Name: Address: 919 THIRD AVENUE, NW Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: Title: () Delete Title: () Change () Addition MAJERUS, CECIY CHAIR Name: Name: 25 EUCALYPTUS ROAD Address: Address: City-St-Zip: BERKELEY, CA 94705 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PLUMMER, SHARI SANT DIR Name: Address: 2099 PENN AVENUE Address: City-St-Zip: WASHINGTON, DC 20006 City-St-Zip: Title: () Delete Title: () Change () Addition KUEBLER, CHRIS TD Name: Name: 141 MAPLE HILL ROAD Address: Address: City-St-Zip: GALDWYNE, PA 19035 City-St-Zip: Title: () Delete Title: () Change () Addition ALLEN, JR., ROBERT DIR Name: Name: Address: 1441 BRICKELL AVE., SUITE 1014 Address: MIAMI, FL 33131 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY AMON CFO 03/12/2009