

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P38074 (1)

1. Corporation Name  
**CENTER FOR MARINE CONSERVATION, INC.**



Principal Place of Business: 1725 DESALES ST., NW SUITE 500 WASHINGTON DC 20036 US  
Mailing Address: 1725 DESALES ST., NW SUITE 500 WASHINGTON DC 20036 US

3. Date Incorporated or Qualified: 03/26/1992  
3a. Date of Last Report: 02/17/1995

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number 23-7245152	Applied For
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Zip	29	Zip	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Country		Country			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, PAUL G  
ONE BEACH DR. SE, SUITE 304  
ST. PETERSBURG FL 33701

81	Name	Ellen Peel	
82	Street Address (P.O. Box Number is Not Acceptable)	One Beach Drive SE, Suite 304	
83			
84	City	St. Petersburg	FL
85	Zip Code	33701	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Ellen M. Peel* (Signature, typed or printed name of registered agent and title if applicable.)  
DATE: February 20, 1996 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P MCMANUS, ROGER E 4019 18TH STREET WASHINGTON DC 20011	<input checked="" type="checkbox"/> DELETE	1.1 TITLE D/V E.U. Curtis Bohlen 4710 Quebec Street, NW Washington, DC 20016
TITLE	V LEDBETTER, EDYTHE B 6118 ARBOR STREET CHEVERLY MD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE D Dr. William Y. Brown 6024 Onondaga Road Bethesda, MD 20816
TITLE	V IUDICELLO, SUZANNE 2000 S 27TH ST ARLINGTON VA	<input checked="" type="checkbox"/> DELETE	3.1 TITLE [ ] Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 5248 Kings Bank Drive Springfield VA 22151
TITLE	V KNIGHT, DAVID 4632 WOODFIELD ROAD BETHESDA MA 20814	<input checked="" type="checkbox"/> DELETE	4.1 TITLE D/C Cecily Majerus 663 Santa Maria Lane Davidsonville, MD 21035
TITLE	V GROSS, ANNE-MARIE 831 NEAL DR ALEXANDRIA VA	<input checked="" type="checkbox"/> DELETE	5.1 TITLE [ ] Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 200001748902 -03/19/96--01048--029 ***61.25
TITLE	[ ] DELETE	[ ] DELETE	6.1 TITLE [ ] Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Edythe Ledbetter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: 2/12/96  
Daytime Phone #: 302-409-5609

CR2E037 (12/95)