FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 710499 (5)

1. Corporation Name
OKLAWAHA VALLEY AUDUBON SOCIETY, INC.

Principal Place of Business	Mailing Address
ONE ABERDEEN CIR LEESBURG FL 34788 US	PO BOX 641 EUSTIS FL 32727-0641 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/10/1966
3a. Date of Last Report: 02/10/1994
4. FEI Number: 23-7160887 59-2940154 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status XX — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes XX ☐ No

2. Principal Place of Business	2a. Mailing Address
21 1002 Clusterwood Dr.	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Yalaha, FL	28 City & State
24 Zip 34797 25 Country US	29 Zip 30 Country

9. Name and Address of Current Registered Agent

KRUGHOFF, WARREN
524 OLD COLONY RD
LEESBURG FL 34748

10. Name and Address of New Registered Agent

81 Name: Russell C. Peeples
82 Street Address (P.O. Box Number is Not Acceptable): 1002 Clusterwood Dr.
83
84 City: Yalaha FL 85 Zip Code: 34797

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Russell C. Peeples RUSSELL C. PEEPLES TREASURER APRIL 13, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P D	XX Change ☐ Addition
NAME	KISSNER, LINDA	1.2 NAME	Elizabeth Ballard	
STREET ADDRESS	40535 PLYMOUTH CIRCLE	1.3 STREET ADDRESS	611 Old Eustis Rd	
CITY-ST-ZIP	UMATILLA FL	1.4 CITY-ST-ZIP	Mt. Dora, FL 32757	
TITLE	VP	2.1 TITLE	VP D	XX Change ☐ Addition
NAME	LANGER, WOLFGANG	2.2 NAME	Joyce Wutke	
STREET ADDRESS	2235 ORKNEY DRIVE	2.3 STREET ADDRESS	227 Royal Dr.	
CITY-ST-ZIP	LEESBURG FL	2.4 CITY-ST-ZIP	Eustis, FL 32726	
TITLE	VP	3.1 TITLE		☐ Change ☐ Addition
NAME	ROGERS, BOB	3.2 NAME		
STREET ADDRESS	37936 HWY 19 #48	3.3 STREET ADDRESS		
CITY-ST-ZIP	UMATILLA FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	T D	XX Change ☐ Addition
NAME	PEEPLES, RUSSELL C.	4.2 NAME		
STREET ADDRESS	1002 CLUSTERWOOD DR.	4.3 STREET ADDRESS		
CITY-ST-ZIP	YALAHA FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE	S	XX Change ☐ Addition
NAME	BALLARD, ELIZABETH	5.2 NAME	Mary Dixon	
STREET ADDRESS	611 OLD EUSTIS RD	5.3 STREET ADDRESS	307 Laura Lane	
CITY-ST-ZIP	MT. DORA FL	5.4 CITY-ST-ZIP	Mt. Dora FL 32757	
TITLE	D	6.1 TITLE	D	XX Change ☐ Addition
NAME	WUTKEE, WARREN	6.2 NAME	Fran Yokel	
STREET ADDRESS	27 ROYAL DRIVE	6.3 STREET ADDRESS	119 Pond Dr	
CITY-ST-ZIP	EUSTIS FL	6.4 CITY-ST-ZIP	Mt. Dora, FL 32757	

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)(i), 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: Russell C Peeples RUSSELL C. PEEPLES APRIL 13, 1995 904/324-3372
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0031400