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 APR 18 PM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 710524 (0)

1. Corporation Name
AUDUBON SOCIETY OF THE EVERGLADES, INC.

Principal Place of Business	Mailing Address
2328 S. CONGRESS AVE. SUITE 1G WEST PALM BEACH FL 33406	2328 S. CONGRESS AVE. SUITE 1G WEST PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/15/1966
3a. Date of Last Report: 04/21/1994
4. FEI Number: 59-6019654 ☐ 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 ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BLOCHER, DALE M.
2328 S. CONGRESS AVE. SUITE 1G
WEST PALM BEACH, F FL 33406

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	PE D	☒ Change ☐ Addition
NAME	BRACEY, ELWOOD DR	1.2 NAME	SNYDER, SUSAN	
STREET ADDRESS	1515 N FLAGLER DR	1.3 STREET ADDRESS	1810 Carandis Road	
CITY-ST-ZIP	W PALM BEACH FL	1.4 CITY-ST-ZIP	Lake Clark Shores, FL 33406	
TITLE	SD	2.1 TITLE	SD	☒ Change ☐ Addition
NAME	SCOTT, JO-ANN	2.2 NAME	TILLER, PATRICIA	
STREET ADDRESS	4200 CHUKKER DRIVE	2.3 STREET ADDRESS	887 Cotton Bay Dr.W., #208	
CITY-ST-ZIP	W PALM BEACH FL	2.4 CITY-ST-ZIP	West Palm Beach, FL 33406	
TITLE	V	3.1 TITLE	VD	☐ Change ☒ Addition
NAME	POTTER, CHARLES	3.2 NAME		
STREET ADDRESS	819 S ATLANTIC DR	3.3 STREET ADDRESS		
CITY-ST-ZIP	LANTANA FL	3.4 CITY-ST-ZIP	33462	
TITLE	D	4.1 TITLE		☐ Change ☒ Addition
NAME	TRUMPOWER, RUTH	4.2 NAME		
STREET ADDRESS	165 AUBURN DR	4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH, FL 00000	4.4 CITY-ST-ZIP	33460	
TITLE	T	5.1 TITLE	TD	☐ Change ☒ Addition
NAME	MILLER, SEYMOUR	5.2 NAME		
STREET ADDRESS	STRATFORD O-107	5.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BEACH FL	5.4 CITY-ST-ZIP	33417	
TITLE	PD	6.1 TITLE		☐ Change ☒ Addition
NAME	GIRARD, JEANNE	6.2 NAME		
STREET ADDRESS	2641 GATELY DR W. NO. 805	6.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BCH FL	6.4 CITY-ST-ZIP	33415	

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: _____ SEYMOUR MILLER 4/12/95 407-588-6908
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
TREASURER

0011018