FILE NOW: FILING FEE AFTER MAY 1 IS $155

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **726093** **(8)**

1. Corporation Name

* **THE ZOOLOGICAL SOCIETY OF FLORIDA**

Principal Place of Business	Mailing Address
12400 SW 152 STREET MIAMI FL 33177	12400 SW 152 STREET MIAMI FL 33177

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/11/1973**
3a. Date of Last Report: **02/08/1994**
4. FEI Number: **59-6192814** ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)	5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
Suite, Apt. #, etc (22)	Suite, Apt. #, etc (27)	6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
City & State (23)	City & State (28)	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
Zip (24) / Country (25)	Zip (29) / Country (30)	8. This corporation has ... for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
EKEY, GLENN W. 12400 S. W. 152 STREET MIAMI FL 33177	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	V	11 TITLE	☒ Change ☐ Addition
NAME	KISLAK, JEAN	12 NAME	VP Gurney, William J. III
STREET ADDRESS	720 N.E. 69TH ST.	13 STREET ADDRESS	200 S.E. 1st St. Suite 1100
CITY ST ZIP	MIAMI FL	14 CITY ST ZIP	Miami, Florida 33131-2104
TITLE	T	21 TITLE	☐ Change ☐ Addition
NAME	CAMBEST, LYNN	22 NAME	
STREET ADDRESS	777 BRICKELL AVE., 3RD FLOOR	23 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	
TITLE	S	31 TITLE	☒ Change ☐ Addition
NAME	JACK, LAURA	32 NAME	SD Roulhac, Peter W.
STREET ADDRESS	15450 NEW BARN RD., SUITE 211	33 STREET ADDRESS	200 S. Biscayne Blvd. 15th Floor
CITY ST ZIP	MIAMI FL	34 CITY ST ZIP	Miami, Florida 33131
TITLE	PD	41 TITLE	☒ Change ☐ Addition
NAME	HAWKINS, FRANK N	42 NAME	PD Cobb, Sue
STREET ADDRESS	ONE HERALD PLAZA, 6TH FLOOR	43 STREET ADDRESS	2333 Ponce De Leon Blvd. PH 1111
CITY ST ZIP	MIAMI FL	44 CITY ST ZIP	Coral Gables, Florida 33134
TITLE	ED	51 TITLE	☐ Change ☐ Addition
NAME	GLENN, W. EKEY	52 NAME	
STREET ADDRESS	12400 S.W. 152ND ST	53 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	54 CITY ST ZIP	
TITLE	V	61 TITLE	☐ Change ☐ Addition
NAME	GREIF, MICHAEL T.	62 NAME	
STREET ADDRESS	1110 BRICKELL AVE.	63 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	64 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)(i), Florida Statutes. I further certify that the information indicated on this 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 with an address.

SIGNATURE: X Glenn W. Ekey 4/11/95 (305)255-5551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0044706