2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731455

FILED Apr 10, 2006 Secretary of State

Entity Name: BAY COUNTY AUDUBON SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 1182

PANAMA CITY, FL 324021182 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1182

PANAMA CITY, FL 324021799

FEI Number: 51-0163793 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:

GERDE, JERRY W 239 E. FOURTH ST.

PANAMA CITY, FL 32401 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:

Title: P () Delete Title: P (X) Change () Addition Name: BENTON, JOHN Name: LAMB, NEIL J

 Address:
 3609 DELWOOD DR.
 Address:
 914 TECH DR.

 City-St-Zip:
 PANAMA CITY, FL 32402
 City-St-Zip:
 LYNN HAVEN, FL 32444

Title: V () Delete Title: V (X) Change () Addition

 Name:
 LAMB, NEIL J
 Name:
 TAYLOR, LOUISA

 Address:
 914 TECH DR
 Address:
 212 VIRGINIA AVE

 City-St-Zip:
 LYNN HAVEN, FL 32444
 City-St-Zip:
 LYNN HAVEN, FL 32444

Title: S () Delete Title: S (X) Change () Addition

 Name:
 GLADIS, JANET
 Name:
 INGRAM, ANN

 Address:
 2300 WIITH ST
 Address:
 12634 PIERCY RD

 City-St-Zip:
 PANAMA CITY, FL 32401
 City-St-Zip:
 PANAMA CITY, FL 32404

 Name:
 LAMB, SUSAN
 Name:
 LAMB, SUSAN E

 Address:
 914 TECH DR.
 Address:
 914 TECH DR.

 City-St-Zip:
 LYNN HAVEN, FL 32444
 City-St-Zip:
 LYNN HAVEN, FL 32444

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN E. LAMB T 04/10/2006