

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90023 036 ****61.25

DOCUMENT # N06000006608 1. Entity Name FLORIDA CONSERVATION ASSOCIATION, INC.					
Principal Place of Business 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806			Mailing Address 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806		
2. Principal Place of Business - No P.O. Box # 4061 FORRESTAL AVE		3. Mailing Address P.O. BOX 568886			
Suite, Apt. #, etc. SUITE 8		Suite, Apt. #, etc. 			
City & State ORLANDO		City & State ORLANDO		4. FEI Number 74-1984482	
Zip 32806		Country ORANGE		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Zip 32856		Country ORANGE		04182007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent BIRD, WILLIAM R JR. 215 N. EOLA DR. ORLANDO, FL 32801			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARTER, MARK 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC 2932 BOWER RD WINTER PARK, FL 32792	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KIDD, KEN 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRAY, JAMES T. 1319 BACKWOOD DR. ORLANDO, FL 32806	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEIGER, GEORGE 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C 566 PONOKA ST. SEBASTIAN, FL 32958	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWTON, DAVID 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO HENDRICKS, ROBERT 5119 BEACH RIVER RD WINDERMERE, FL 34786	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, STUART 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BIRD, WILLIAM 215 N. EOLA DR. ORLANDO, FL 32801	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PINDER, JOHN 3333 S. ORANGE AVE., SUITE 103 ORLANDO, FL 32806	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELLRICH, DAVID W. JR. 4400 PGA BLVD, SUITE 400 PALM BEACH GARDENS, FL 33410	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/24/07 401-854-7602 Date Daytime Phone #		