

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 731455

**Entity Name:** BAY COUNTY AUDUBON SOCIETY, INC.

**Current Principal Place of Business:**

3416 W. HWY 390.  
PANAMA CITY, FL 32405

**Current Mailing Address:**

P.O. BOX 1182  
PANAMA CITY, FL 32402-1799

**FEI Number: 51-0163793**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JELKS, ALLEN N  
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:** ALLEN N. JELKS, JR.

01/08/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name TAYLOR, LOUISA B.  
Address 3416 W. HWY 390  
City-State-Zip: PANAMA CITY FL 32405

Title CO-PRESIDENT  
Name LAMB, NEIL  
Address 914 TECH DR..  
City-State-Zip: LYNN HAVEN FL 32444

Title VP  
Name CAPRA, MARY JO  
Address 728 BLANCHARD DR..  
City-State-Zip: PANAMA CITY BEACH FL 32413

Title T  
Name SHAFFER, JOHN  
Address 1500 W. BEACH DR.  
City-State-Zip: PANAMA CITY FL 32401

Title S  
Name SHADER, ROBIN  
Address 116 HOMBRE CIRCLE.  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title D  
Name HOUSER, RON  
Address 1845 W. 24TH CT.  
City-State-Zip: PANAMA CITY FL 32405

*I hereby 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 all other like empowered.*

**SIGNATURE:** LOUISA TAYLOR

**PRESIDENT**

01/08/2014

Electronic Signature of Signing Officer/Director Detail

Date