

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06661

**FILED**  
**Feb 01, 2018**  
**Secretary of State**  
**CC6131773004**

**Entity Name:** EAST COAST ZOOLOGICAL SOCIETY OF FLORIDA, INC.

**Current Principal Place of Business:**

8225 N WICKHAM ROAD  
MELBOURNE, FL 32940

**Current Mailing Address:**

8225 N WICKHAM ROAD  
MELBOURNE, FL 32940 US

**FEI Number: 59-2496749**

**Certificate of Status Desired: Yes**

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

BEADLE, JAMES P.  
5205 BABCOCK ST. NE  
PALM BAY, FL 32905 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

**Officer/Director Detail :**

Title           TREASURER  
Name           CEROW, MICHAEL  
Address        422 MIAMI AVE.  
City-State-Zip: INDIALANTIC FL 32903

Title           PRESIDENT  
Name           OLIVER, COLE  
Address        431 SWANN GROVE LANE  
City-State-Zip: MERRITT ISLAND FL 32952

Title           ED  
Name           WINSTEN, DAVID K  
Address        1937 AUBURN LAKES DRIVE  
City-State-Zip: ROCKLEDGE FL 32955

Title           VP  
Name           ASSAM, JESSICA  
Address        P.O. BOX 410970  
City-State-Zip: MELBOURNE FL 32941

Title           VP  
Name           BROWN, KIM J  
Address        31 WEST POINT DR.  
City-State-Zip: COCOA BEACH FL 32931

Title           VP  
Name           GITLIN, BETH  
Address        655 CINNAMON CT.  
City-State-Zip: SATELLITE BEACH FL 32937

Title           SECRETARY  
Name           BOMALASKI, LAURA  
Address        11600 DRAGON POINT DR.  
City-State-Zip: MERRITT ISLAND FL 32952

Title           CFO  
Name           FIESELER, FRANK JOHN  
Address        8225 N WICKHAM ROAD  
City-State-Zip: MELBOURNE FL 32940

**Continues on page 2**

*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: FRANK J. FIESELER**

**CFO/COO**

**02/01/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP.  
Name BARKER, JACQULINE  
Address 8225 N WICKHAM ROAD  
City-State-Zip: MELBOURNE FL 32940