

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001086

Entity Name: MARINE MAMMAL CONSERVANCY, INC.**Current Principal Place of Business:**102200 OVERSEAS HWY,
KEY LARGO, FL 33037**Current Mailing Address:**PO BOX 1625
KEY LARGO, FL 33037 US**FEI Number:** 65-0562563**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**STEVENS, ROBERT O
31 CORINNE PLACE
KEY LARGO, FL 33037 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:** ROBERT O. STEVENS

04/18/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, DIRECTOR
Name COOPER, ARTHUR G
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title PRESIDENT, DIRECTOR
Name STEVENS, ROBERT O
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title VP, DIRECTOR
Name KLOCK, KATHY M
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title SECRETARY, DIRECTOR
Name KNOBLOCK, BETSY
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name KNOBLOCK, HENRY M
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name TURNER, TED N
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name FRIDAY, SR., ROBIN B
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name SIMMONS, MARK A
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

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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: ARTHUR G. COOPER

CHAIRMAN, DIRECTOR

04/18/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FEUCHT, TODD
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name TRIMM, MARK A
Address PO BOX 1625
City-State-Zip: KEY LARGO FL 33037