2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701780

FILED May 12, 2006 Secretary of State

Entity Name: TROPICAL AUDUBON SOCIETY INCORPORATED

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
5530 SUN MIAMI, FL	SET DRIVE 33143			
Current M	lailing Address:	New Maili	ing Address:	
5530 SUN MIAMI, FL	SET DRIVE 33143			
	: 59-6147345 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not receive	Number Not App ve the prior notic		
Name and	Address of Current Registered Agent:	Name and	I Address of New Registered Agent:	
5530 SUN MIAMI, FL	33143 US			
	named entity submits this statement for the purpose of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICER	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete BARROS, JOE 5825 BLUE RD. MIAMI, FL 33155	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	1VPD () Delete TOWNSEND, DICK 7985 SW 124TH ST. MIAMI, FL 33156	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	2VPD () Delete OLLE, DENNIS 934 ANDRES AVE. MIAMI, FL 33134	Title: Name: Address: City-St-Zip:	2VPD (X) Change () Addition RAPOZA, BRIAN 14525 SW 88 ST #J-207 MIAMI, FL 33186	
Title: Name: Address: City-St-Zip:	TD () Delete RIST, KARSTEN 18014 SW 83 COURT MIAMI, FL 33157	Title: Name: Address: City-St-Zip:	3VP (X) Change () Addition REYNOLDS, LAURA 20715 LEEWARD LANE MIAMI, FL 33189	
Title: Name: Address: City-St-Zip:	SD () Delete KIMBALL-MURLEY, AMY 2110 SW 3RD AVE, #6B MIAMI, FL 33129	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition PARDO, GEORGINA 6800 SW 67 ST MIAMI, FL 33143	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SD () Change (X) Addition KIMBALL-MURLEY, AMY 1890 SW 21 ST MIAMI, FL 33145	

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: JOE BARROS PD 05/12/2006