


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90030 002 ****61.25

DOCUMENT # 710976

1. Entity Name
**THE PELICAN ISLAND AUDUBON SOCIETY
INCORPORATED**



Principal Place of Business Mailing Address

**1931 14TH AVE
P.O. BOX 1833
VERO BEACH FL 32961**

~~1931 14TH AVE~~
**P.O. BOX 1833
VERO BEACH FL 32961**



2. Principal Place of Business - No P.O. Box #
200 9TH ST, SE.

3. Mailing Address
P.O. BOX 1833

Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State
VERO BEACH, FL

City & State
VERO BEACH, FL

4. FEI Number
59-6197617

Applied For
 Not Applicable

Zip
32962

Country
INDIAN RIVER

Zip
32961-1833

Country
INDIAN RIVER

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BAKER, RICHARD H
522 N. BLUE ISLAND LANE
SEBASTIAN FL 32958**

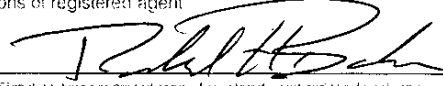
7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

B. 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:  DATE: **1-25-08**

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature is not used when it is changed.)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	TRIPSON, JENS	2525 14TH ST	VERO BEACH FL 32960	<input type="checkbox"/>
D	COX, DAVID	9495 PERIWINKLE DR.	VERO BEACH FL 32963	<input checked="" type="checkbox"/>
P	BAKER, RICHARD	522 N BLUE ISLAND LA	SEBASTIAN FL 32958	<input type="checkbox"/>
T	ADAIR, ROBERT	7055 33RD ST.	VERO BEACH FL 32966	<input type="checkbox"/>
D	SMITH, ROBERT L	295 COCONUT PALM RD	VERO BEACH FL 32963	<input checked="" type="checkbox"/>
D	DOTY, KEVIN	411 HOLLY RD	VERO BEACH FL 32963	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
	SECRETARY 2ND VICE PRESIDENT	SUSAN ROYD	8025 24TH STREET	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
	PROVING SECRETARY	DAILENE HALLIBAY	926 SW 19TH PLACE	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	COMMUNICATING SECRETARY	JEAN CATCHPOLE	526 RIDGEMOOD ROAD	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  DATE: **1-25-08**