2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# 718712

Entity Name: CALUSA NATURE CENTER AND PLANETARIUM, INC.

Current Principal Place of Business:

3450 ORTIZ AVENUE
FORT MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

3450 ORTIZ AVE
FORT MYERS, FL 33705 US

New Mailing Address:

FEI Number: 23-7090889 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWALLEN, SANDERS
3450 ORTIZ AVENUE
FORT MYERS, FL 33905 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: EXED ( ) Delete
Name: LEWALLEN, SANDERS
Address: 3450 ORTIZ AVE
City-St-Zip: FORT MYERS, FL 33905

Title: T ( ) Delete
Name: REYNOLDS, CHUCK
Address: 14241 METRO PARKWAY
City-St-Zip: FORT MYERS, FL 33912

Title: P ( ) Delete
Name: SOTER, BOB
Address: 9530 MARKET PLACE ROAD SUITE 104
City-St-Zip: FORT MYERS, FL 33912

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: REYNOLDS, CHARLES
Address: 14241 METRO PARKWAY
City-St-Zip: FORT MYERS, FL 33912

Title: P (X) Change ( ) Addition
Name: WILLIAMS, RALPH
Address: 3450 ORTIZ AVENUE
City-St-Zip: FORT MYERS, FL 33905

Title: S ( ) Change (X) Addition
Name: WOODRUFF, ANDREW
Address: 3450 ORTIZ AVENUE
City-St-Zip: FORT MYERS, FL 33905

I hereby certify that the information supplied with this filing does not qualify 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: SANDERS LEWALLEN EXED 04/15/2009

Electronic Signature of Signing Officer or Director — Date