

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90019 026 ****61.25

DOCUMENT # 736427 1. Entity Name FRANCIS M. WESTON AUDUBON SOCIETY, INC.					
Principal Place of Business P.O. BOX 17484 PENSACOLA, FL 32522				Mailing Address P.O. BOX 17484 PENSACOLA, FL 32522	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BAKER, PEGGY V 501 VIA DE LUNA DR. PENSACOLA, FL 32501				Name JAMES BRADY Street Address (P.O. Box Number is Not Acceptable) 6904 KITTY HAWK DR. City PENSACOLA FL FL Zip Code 32506	
8. 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 <i>James A. Brady, President</i> Signature, typed or printed name of registered agent and title, if applicable.				DATE 2/5/04 (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BAKER, PEGGY V 501 VIA DE LUNA DR. PENSACOLA, FL 32561	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D BRADY, JAMES 6904 KITTY HAWK DR. PENSACOLA, FL 32506	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BRADY, JAMES 6904 KITTY HAWK DR. PENSACOLA, FL 32506	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/D REUNERT, ANNALISE 15747 BOWLEGS REEF PENSACOLA, FL 32507	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S NEWMAN, MARY 407 WEST LEE ST. PENSACOLA, FL 32501	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S TETLOW, MURIEL 3435 BLUERIDGE DR. PENSACOLA, FL 32504	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D REUNERT, ANNALISE 15747 BOWLEGS REEF PENSACOLA, FL 32507	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ASCHERFELD, CAROL 901 ARIOLA DR PENSACOLA BEACH, FL 32561	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T KELLY, ELIZABETH A 2721 SEMORAN DR. PENSACOLA, FL 32503	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/D ZICCARDI, ANTHONY 615 BAYSHORE DR #606 PENSACOLA FL 32507	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FORSTER, ANN 447 CREARY ST. PENSACOLA, FL 32507	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOORE, HEIDI 3090 ROBINSON POINT RD MILTON, FL 32583	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Anthony V. Ziccardi, Jr</i> ANTHONY V. ZICCARDI, JR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
TREASURER TREASURER 2/5/04 (850) 456-7568 Date Daytime Phone #					