


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90003 006 \*\*\*\*61.25

<b>DOCUMENT # 736427</b> 1. Entity Name <b>FRANCIS M. WESTON AUDUBON SOCIETY, INC.</b>					
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 - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>51-0204114</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>REUNERT, ANNEISE</b> <b>15747 BONLEGS REEF</b> <b>PENSACOLA, FL 32507</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>15751 Bonlegs Reef</b> City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REUNERT, ANNEISE 15747 BONLEGS REEF PENSACOLA, FL 32507		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Reunert, Annelise 15751 Bonlegs Reef Pensacola, FL 32507	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRADY, JAMES 6904 KITTY HAWK DR PENSACOLA, FL 32506		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Baker, Peggy 501 Via De Luna Drive Pensacola Beach, FL 32562	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, ALICE 2725 SANDICREST DR. CANTONMENT, FL 32533		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Clark, Morris 609 Timber Ridge Road Pensacola, FL 32534	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LLOYD, JAN 609 NORTH 72ND AVE PENSACOLA, FL 32506		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Forster, ANN 447 Creary Street Pensacola, FL 32507	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GRASS, REBECCA P 85 S 69 AVE PENSACOLA, FL 32506		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dana Timmons 3660 Buford Circle Pensacola, FL 32504	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSTON, ELLEN 1952 CROWN POINTE BLVD PENSACOLA, FL 32506		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ellen Roston 1952 Crown Pointe Blvd. Pensacola, FL 32506	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE: Rebecca P. Grass</b> <b>Rebecca P. Grass</b> <b>3/28/08</b> <b>(850)455-9666</b>					