

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90272 026 ****61.25

DOCUMENT # 744264

1. Entity Name

THE AVIARY AND CAGE BIRD SOCIETY OF SOUTH FLORIDA, INC.



Principal Place of Business

**3662 NW 95TH TERR
SUNRISE FL 33351**

Mailing Address

**3662 NW 95TH TERR
SUNRISE FL 33351**

2. Principal Place of Business

851 NW 115th AVE

3. Mailing Address

851 NW 115th AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Plantation, FLORIDA

City & State

Plantation, FLORIDA

4. FEI Number **59-1926480**

Applied For

Not Applicable

Zip

Country

33325 USA

Zip

Country

33325 USA

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

6. Name and Address of Current Registered Agent

**WILKAT, ALBERT O
7520 N.W. 7TH STREET
PLANTATION FL 33317**

7. Name and Address of New Registered Agent

Name

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

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **VO** ☐ Delete
NAME **GREENE, LISA**
STREET ADDRESS **54 RUSSELL CT**
CITY-ST-ZIP **VENUS FL 33960**

TITLE **TD** ☐ Delete
NAME **FLORIO, JOSEPH**
STREET ADDRESS **736 SW 14TH AVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **SD** ☐ Delete
NAME **CUSICK, RUTH**
STREET ADDRESS **851 NW 115TH AVE**
CITY-ST-ZIP **PLANTATION FL 33325**

TITLE **PD** ☐ Delete
NAME **BOWDEN, MARK**
STREET ADDRESS **3662 NW 95TH TER**
CITY-ST-ZIP **SUNRISE FL 33351**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VO** ☒ Change ☐ Addition
NAME **MARCIA DAVID**
STREET ADDRESS **661 SW 54th AVE.**
CITY-ST-ZIP **Plantation, FL 33331**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☒ Change ☐ Addition
NAME **Noreen Taylor**
STREET ADDRESS **2960 SW 22nd St.**
CITY-ST-ZIP **Ft. Lauderdale, FL 33312**

TITLE **PD** ☒ Change ☐ Addition
NAME **Ruth L. Cusick**
STREET ADDRESS **851 NW 115th AVE**
CITY-ST-ZIP **Plantation, Florida 33325**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **SIGNATURE RUTH L. Cusick**

1/12/03

(954) 424-6115

CP2E037 (10/02)