

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

01-29-2008 90007 038 ****61.25

DOCUMENT # 746868

1. Entity Name
ST. JOHN'S COUNTY AUDOBON SOCIETY, INC.



Principal Place of Business
KING ST
ST. AUGUSTINE, FL 32085-0965 US

Mailing Address
PO BOX 965
ST. AUGUSTINE, FL 32085-0965 US

4000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3329771

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SACHS, NANCY
137 TURTLE BAY LANE
PONTE VEDRA BEACH, FL 32082

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

**Filing 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME REED, DIANE
STREET ADDRESS 110 OCEAN HOLLOW LANE #201
CITY-ST-ZIP ST. AUGUSTINE, FL 32084 ☐ Delete

TITLE D
NAME ☒ Change ☐ Addition

TITLE VP
NAME KOLK, CHARLES VONDER
STREET ADDRESS 1270 NECK ROAD
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 ☐ Delete

TITLE P
NAME Ned Shuler
STREET ADDRESS 323 Arpieka Ave
CITY-ST-ZIP St. Augustine FL 32080 ☐ Change ☒ Addition

TITLE D
NAME CHELLEMI, LEE
STREET ADDRESS 410 14TH ST.
CITY-ST-ZIP ST. AUGUSTINE, FL 32084 ☒ Delete

TITLE D
NAME Peggy Cook
STREET ADDRESS 6975 Charles St
CITY-ST-ZIP St. Augustine FL 32080 ☐ Change ☒ Addition

TITLE S
NAME PETERSON, VERONICA
STREET ADDRESS 5437 2ND ST.
CITY-ST-ZIP SAINT AUGUSTINE, FL 32080 ☐ Delete

TITLE D
NAME Barry Albright
STREET ADDRESS 528 Pine Street
CITY-ST-ZIP Neptune Beach FL 32266 ☐ Change ☒ Addition

TITLE D
NAME CARVER, MARGARET
STREET ADDRESS 110 OCEAN HOLLOW LANE #208
CITY-ST-ZIP ST. AUGUSTINE, FL 32084 ☐ Delete

TITLE D
NAME Andrew Thornton
STREET ADDRESS 22 1/2 Hope Street
CITY-ST-ZIP St. Augustine FL 32084 ☐ Change ☒ Addition

TITLE T
NAME Nancy Sachs
STREET ADDRESS 137 Turtle Bay Lane
CITY-ST-ZIP Ponte Vedra Beach FL 32082 ☐ Delete

TITLE D
NAME Frances Preston
STREET ADDRESS 702 Cross Park Drive
CITY-ST-ZIP St. Augustine FL 32084 ☐ Change ☒ Addition

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.

SIGNATURE: Nancy Sachs Nancy Sachs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/2008 904-566-6573
Date Daytime Phone