

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90181 010 ****61.25

DOCUMENT # 752248
 1. Entity Name
APALACHEE AUDUBON SOCIETY, INCORPORATED

Principal Place of Business: **PO BOX 1237 TALLAHASSEE FL 32302**
 Mailing Address: **PO BOX 1237 TALLAHASSEE FL 32302-1237**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **P.O. Box 1237**
 Suite, Apt. #, etc.

3. Mailing Address: **P.O. Box 1237**
 Suite, Apt. #, etc.

City & State: **Tallahassee FL**

City & State: **Tallahassee FL**

Zip: **32302** Country: **USA**

Zip: **32302** Country: **FL**

4. FEI Number: **23-7181962** Applied For: Not Applicable:

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

6. Name and Address of Current Registered Agent
GOLDMAN, HARVEY
1115 SANDHURST DRIVE
TALLAHASSEE FL 32312

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.

SIGNATURE: Harvey Goldman HARVEY GOLDMAN (Treasurer) DATE: 1/7/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SONGER, KEVIN	
STREET ADDRESS	314 N. CALHOUN STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32301	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PAUGH, LESLIE	
STREET ADDRESS	DEPT OF STATE, DIV. OF ELECTIONS	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GOLDMAN, HARVEY	
STREET ADDRESS	1115 SANDHURST DRIVE	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WENSING, KAREN	
STREET ADDRESS	256 TIMBERLANE ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	D	<input type="checkbox"/> Delete
NAME	JUE, DEAN	
STREET ADDRESS	3455 DORCHESTER COURT	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HENDERSON, BOB	
STREET ADDRESS	2309 W. MISSION ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32304-2662	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JIM SHELTON	
STREET ADDRESS	1914 TY TY COURT	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JIM CREWS	
STREET ADDRESS	P.O. BOX 3894	
CITY-ST-ZIP	TALLAHASSEE FL 32315-3894	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELLEN SHELTON	
STREET ADDRESS	1914 TY TY COURT	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANS VAN TOL	
STREET ADDRESS	2731 BLAZE STONE ROAD, APT #17	
CITY-ST-ZIP	TALLAHASSEE FL 32301-5908	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARY BLAKESLEE	
STREET ADDRESS	803 EAST CALL STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32301-2622	

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: Harvey Goldman HARVEY GOLDMAN, Treasurer DATE: 1/7/00 DAYTIME PHONE #: 850-644-4539
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)