

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90027 018 ****61.25

DOCUMENT # 757426

1. Entity Name

**AFRICAN SAFARI CLUB OF FLORIDA CONSERVATION FUND
 INC.**

Principal Place of Business

**6550 N. FEDERAL HWY #220
 FT LAUDERDALE FL 33308**

Mailing Address

**6550 N. FEDERAL HWY #220
 FT LAUDERDALE FL 33308**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

330

Suite, Apt. #, etc.

330

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2093449

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**HEINRICH, EUGENE L
 500 E. BROWARD BLVD, 10TH FLOOR
 FT LAUDERDALE FL 33394**

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

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
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **GAINEY, LOU**
 STREET ADDRESS **133 N. 12TH PLACE**
 CITY-ST-ZIP **LANTANA FL**

TITLE **D** ☐ Delete
 NAME **MALONE, KEVIN**
 STREET ADDRESS **700 SE 3RD AVE**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE **VP** ☐ Delete
 NAME **TUIT, GREG**
 STREET ADDRESS **12041 ASHFORD LANE**
 CITY-ST-ZIP **DAVIE FL 33325**

TITLE **D** ☐ Delete
 NAME **CHARLAND, DAVE**
 STREET ADDRESS **3559 NW 53RD ST.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33309**

TITLE **T** ☐ Delete
 NAME **SAWYER, THOMAS R II**
 STREET ADDRESS **5725 NE 16 AVE**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **P** ☐ Delete
 NAME **GILBERT, GEORGE**
 STREET ADDRESS **2201 NE 227 PLACE**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33305**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
 NAME
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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:

Thomas Sawyer, Treasurer

1/10/02

954-491-7233

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

0028534