


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90088 024 ****61.25

DOCUMENT # 757426 1. Entity Name AFRICAN SAFARI CLUB OF FLORIDA CONSERVATION FUND, INC.					
Principal Place of Business 6550 N. FEDERAL HWY STE 330 FT LAUDERDALE, FL 33308			Mailing Address 6550 N. FEDERAL HWY STE 330 FT LAUDERDALE, FL 33308		
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 59-2093449	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SAWYER, THOMAS R III 6550 N FEDERAL HWY # 330 FORT LAUDERDALE, FL 33308-1400				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				\$8.75 Additional Fee Required	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete MCDERMOTT, TIM 1761 SW 54TH TERR FORT LAUDERDALE, FL 33317		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VP KEN HAAS 2310 N E 29 ST. Lighthouse Point, FL 33064	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete LITTLE, MIKE 2495 PROVENCE CIRCLE WESTON, FL 33327		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Fred Farnitz 12399 N E 224 ST. OKeechobee, FL 34972	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete TAIT, GREG 12041 ASFORD LANE DAVIE, FL 33325		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kevin Leonard 8640 Banyan Place Tamarac, FL 33321	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete CHARLAND, DAVE 3559 NW 53RD ST. FT. LAUDERDALE, FL 33309		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Change <input type="checkbox"/> Addition SAWYER, THOMAS R II 6550 N. FEDERAL HWY #330 FORT LAUDERDALE, FL 33308	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete GILBERT, GEORGE 2201 NE 227 PLACE FORT LAUDERDALE, FL 33305		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition GILBERT, GEORGE 2201 NE 227 PLACE FORT LAUDERDALE, FL 33305	
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: <i>Thomas R Sawyer</i>			Thomas R Sawyer		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 1-8-07 Daytime Phone 954-491-7233		