

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761234

FILED  
Apr 10, 2007  
Secretary of State

**Entity Name:** AMERICAN WETLANDS RESEARCH FOUNDATION, INC.

**Current Principal Place of Business:**

95 LIGHTHOUSE DRIVE  
217 S ADAMS STREET  
JUPITER, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

95 LIGHTHOUSE DRIVE  
217 S ADAMS STREET  
JUPITER, FL 33469

**New Mailing Address:**

**FEI Number:** 59-2459075      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SNYDER, ROBERT M.  
95 LIGHTHOUSE DRIVE  
JUPITER, FL 33469      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SNYDER, ROBERT M.,  
Address: 95 LIGHTHOUSE DRIVE  
City-St-Zip: JUPITER, FL 33469

Title: VD ( ) Delete  
Name: SNYDER, BEATRICE,  
Address: 95 LIGHTHOUSE DRIVE  
City-St-Zip: JUPITER, FL 33469

Title: D ( ) Delete  
Name: MINGES, MARGARET  
Address: 234 SHELTER LN  
City-St-Zip: JUPITER, FL 33469

Title: D ( ) Delete  
Name: SKILES, WES C  
Address: 5479 NE 56TH ST.  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D ( ) Delete  
Name: BISSON, ROBERT  
Address: 206 S. LEE ST.  
City-St-Zip: ALEXANDRIA, VA 22314

Title: D ( ) Delete  
Name: MINGES, JAMES  
Address: 234 SHELTER LN.  
City-St-Zip: JUPITER, FL 33469

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT M. SNYTDER

PD

04/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date