


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2005 8:00 am
Secretary of State

05-17-2005 90018 020 ****61.25

DOCUMENT # 809761 1. Entity Name NATIONAL AUDUBON SOCIETY					
Principal Place of Business 700 BROADWAY NEW YORK, NY 10003			Mailing Address 700 BROADWAY NEW YORK, NY 10003		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331				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.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 7, 2005		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 FLICKER, JOHN 215 E 68TH STREET #20B NEW YORK, NY	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD BIOLONER, CAROL 901 15TH STREET NW, SUITE 1000 WASHINGTON, DC 20005	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD Browner Carol 7003 Westmoreland Ave Takoma Park, MD 20913 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V QUINN, MONIQUE 123-69 BEACH CHANNEL DR BELL HARBOR, NY 11694	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Quinn, Monique 123-69 Beach Channel Drive Belle Harbor, NY 11694 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS DOUGLAS, PATRICIA 21-A SEYMOUR LANE MEDFORD, NY 11763	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KAHLE, CHARLES F 6900 56TH AVE NE SEATTLE, WA 98115	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DEMPSEY, JACK 4624 BROWNDAL AVE EDINA, MN 55952	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>Patricia Douglas</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			5/12/2005 (212) 979-3172 <small>Date Daytime Phone #</small>		

50052859



05122005 Chg-NP CR2E037 (10/03)

4. FEI Number
13-1624102 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331**

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. 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 September 7, 2005**

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
FLICKER, JOHN
215 E 68TH STREET #20B
NEW YORK, NY

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CD
BIOLONER, CAROL
901 15TH STREET NW, SUITE 1000
WASHINGTON, DC 20005

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
QUINN, MONIQUE
123-69 BEACH CHANNEL DR
BELL HARBOR, NY 11694

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
AS
DOUGLAS, PATRICIA
21-A SEYMOUR LANE
MEDFORD, NY 11763

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
KAHLE, CHARLES F
6900 56TH AVE NE
SEATTLE, WA 98115

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
DEMPSEY, JACK
4624 BROWNDAL AVE
EDINA, MN 55952

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CD
Browner Carol
7003 Westmoreland Ave
Takoma Park, MD 20913
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Quinn, Monique
123-69 Beach Channel Drive
Belle Harbor, NY 11694
☒ Change ☐ Addition

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

TITLE
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SIGNATURE: *Patricia Douglas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/2005 (212) 979-3172
Date Daytime Phone #

Patricia Douglas