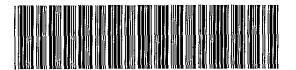
F03000006148

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
,	
Special Instructions to Filing Officer:	





200024801332

11/21/03--01047--003 **70.00

W 12/12

Cape to MM 9: 30

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: THE AUDUBON SOCIETY OF NE	EW YORK STATE, INC.
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Con Affairs in Florida", "Certificate of Existence", and check not for profit corporation to conduct its affairs in Florida.	are submitted to register the above referenced
Please return all correspondence concerning this matter to	
Howard A TACK	w03-36005
HOWARD A. JACK (Name of Pers	son)
THE AUDUBON SOCIETY OF NEW (Firm/Compa	
46 RARICK ROAD (Address)	
SELKIRK, NY 12158 (City/State and Zi	p Code)
For further information concerning this matter, please cal	LL: 03 DI
Howard A. Jack at (5 (Are	A ROO
Registration Section Division of Corporations 409 E. Gaines St.	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	\$78.75 Filing Fee & Sertified Copy Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 2, 2003

HOWARD A. JACK THE AUDUBON SOCIETY OF NY STATE, INC. 46 RARICK ROAD SELKIRK, NY 12158

SUBJECT: THE AUDUBON SOCIETY OF NEW YORK STATE, INC.

Ref. Number: W03000036005

We have received your document for THE AUDUBON SOCIETY OF NEW YORK STATE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 903A00064726



The Audubon Society of New York State, Inc.

Hollyhock Hollow Sanctuary, 46 Rarick Road • Selkirk, NY 12158 • 518-767-9051

December 8, 2003

Lee Rivers
Document Specialist
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: The Audubon Society of New York State, Inc., Ref. No. W03000036005

Dear Mr. Rivers:

Thank you for your letter of December 2, 2003, and accompanying materials concerning our application for authorization to conduct our affairs in Florida. We have read section 607.1501 of the Florida laws, which you sent along with your letter. The prior activities in which we have engaged involving Florida appear to be of the types listed in subsection (2) of that section, and thus we conclude that we have not previously conducted our affairs in your state. Therefore, I have revised section 6 of our application by inserting the words "upon qualification," as indicated in your letter.

The corrected application is enclosed, along with a copy of your letter, as you directed. Thank you very much for your assistance.

Sincerely,

Howard A. Jack,

Vice President and Secretary

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. THE AUDUBON SOCIETY OF NE (Name of corporation: must include the word "INCORI	WYORK STATE	, INC-	_
(Name of corporation: must include the word "INCORI in language as will clearly indicate that it is a corporation present. "Company" or "Co." may not be used as a corporation.	on instead of a natural po	erson or partnership if not	breviations of like import so contained in the name at
2. NEW YORK (State or country under the law of which it is incorporate)	3. 14-1	1698061	
(State or country under the law of which it is incorpora	ited)	(FEI number, if a	pplicable)
4. <u>June 25, 1987</u> (Date of Incorporation)	5PERF	ETUAL	
(Date of Incorporation)	(Duration	n: Year corp. will cease to	exist or "perpetual")
6. UNEXPURE UP ON QUALIFICATION (Date corporation first conducted Affairs in Flori	TION ida - See sections 617.13	501, 617.1502, and 817.15	(5, F.S.)
1. 46 RARICK ROAD, SELKIRK PR 46 RARICK ROAD, SELKIRK			
II Ana Ann Comme	incipal office address)	•	
46 KARICK KOHO, SELKIRK	M7 /2/58		
(Ci	mrem manng address)		
8. ENVIRONMENTAL EDUCATION (Purpose(s) of corporation authorized in	U AND ASSIS	STANCE	•
(Purpose(s) of corporation authorized in	n home state or country	to be carried out in the sta	te of Florida)
	. (2.2.2.		
9. Name and <u>street address</u> of Florida registered	agent: (P.O. Box or N	Mail Drop Box <u>NOT</u> acc	ceptable)
9. Name and street address of Florida registered		Mail Drop Box <u>NOT</u> acc	ceptable)
9. Name and <u>street address</u> of Florida registered Name: <u>KRAIG MARQUIS</u>		Mail Drop Box <u>NOT</u> acc	ceptable)
Name: KRAIG MARQUIS		Mail Drop Box <u>NOT</u> acc	ceptable)
		Mail Drop Box <u>NOT</u> acc	ceptable)
Name: <u>KRAIG MARQUIS</u> Office Address: <u>439 PRATHER DRIVE</u>	<u> </u>	-	· · · · · · · · · · · · · · · · · · ·
Name: <u>KRAIG MARQUIS</u> Office Address: <u>439 PRATHER DRIVE</u>	<u> </u>	-	· · · · · · · · · · · · · · · · · · ·
Name: KRAIG MARQUIS	<u> </u>	-	· · · · · · · · · · · · · · · · · · ·
Name: <u>KRAIG MARQUIS</u> Office Address: <u>439 PRATHER DRIVE</u> FORT MYERS (City)	<u> </u>	-	· · · · · · · · · · · · · · · · · · ·
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a	Florida	33919 (Zip Code) ess for the above stated	corporation at the place
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the	, Florida ccept service of processes appointment as reg	33919 (Zip Code) ess for the above stated istered agent and agree	corporation at the place e to act in this sapacity.
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the I further agree to comply with the provisions of	Florida ccept service of processe appointment as regulative te	33919 (Zip Code) ess for the above stated istered agent and cample of the proper and cample.	corporation at the place e to act in this sapacity.
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the	Florida ccept service of processe appointment as regulative te	33919 (Zip Code) ess for the above stated istered agent and cample of the proper and cample.	corporation at the place e to act in this sapacity.
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the I further agree to comply with the provisions of	Florida ccept service of processe appointment as regulative te	33919 (Zip Code) ess for the above stated istered agent and cample of the proper and cample.	corporation at the place e to act in this sapacity.
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the I further agree to comply with the provisions of duties, and I am familiar with and accept the obtained.	Florida ccept service of proce te appointment as reg all statutes relative to	33919 (Zip Code) ess for the above stated istered agent and agree o the proper and compl on as registered agent.	corporation at the place e to act in this eapacity. ete performation of my
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the I further agree to comply with the provisions of duties, and I am familiar with and accept the obtained.	Florida ccept service of proce te appointment as reg all statutes relative to	33919 (Zip Code) ess for the above stated istered agent and agree o the proper and compl on as registered agent.	corporation at the place e to act in this eapacity. ete performation of my
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the I further agree to comply with the provisions of duties, and I am familiar with and accept the obtained.	Florida ccept service of proce te appointment as reg all statutes relative to	33919 (Zip Code) ess for the above stated istered agent and agree o the proper and compl on as registered agent.	corporation at the place e to act in this eapacity. ete performation of my
Name: KRAIG MARQUIS Office Address: 439 PRATHER DRIVE FORT MYERS (City) 10. Registered agent's acceptance: Having been named as registered agent and to a designated in this application, I hereby accept the I further agree to comply with the provisions of	Florida ccept service of proce te appointment as reg all statutes relative to	33919 (Zip Code) ess for the above stated istered agent and agree o the proper and compl on as registered agent.	corporation at the place e to act in this sapacity.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS		
Chairman: RONALN G. DODSON		2
Address: 46 RARICK ROAD, SELKIRK, NY 12158		
Vice Chairman: N/A		
Address:		· ·
Director: PATRICIA P. COBB, PH.D., Harris		_ _
Address: 46 RARICK ROAD, SELKIKK, NY 12158		
Director: SHELLY Foy		
Address: P. D. BOX 1887, HOBE SOUND, FL 33475-1087	 -	<u></u>
SEE ATTACHED SHEET FOR OTHER DIRECTORS B. OFFICERS	- ,- ,	·
President: RONALD G. DrDSON		
Address: 46 RARICK ROAD, SELVIRK, NY 12158	_	
Vice President: HOWARD A. JACK	03.0	UVISI
Address: 46 RARICK ROAD, SELKIRK, NY 12158	EC 2	01 PA
Secretary: HOWARD A. TACK	AM 9	SPON SPON
Address: 46 RARICK ROAD, SELKIRK, NY 12158	<u>မ</u>	AFE CHIEF
Treasurer: PETER J. SALINETTI		- <u>-</u> -
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direct Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	ors.	
14. HOWARD A. TACK, VICE PRESIDENT & SECRETARY (Typed or printed name and capacity of person signing application)		

THE AUDUBON SOCIETY OF NEW YORK STATE, INC.

ADDITIONAL DIRECTORS

Director	Business Address
Howard A. Jack	46 Rarick Road, Selkirk, NY 12158
Charles Rouse	P.O. Box 928, Geneva, NY 14456
Peter J. Salinetti	46 Rarick Road, Selkirk, NY 12158
Christopher Wolfe	46 Rarick Road, Selkirk, NY 12158

DIVISION OF CORPORATIONS

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of THE AUDUBON SOCIETY OF NEW YORK STATE, INC. was filed on 08/27/1987, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 07th day of November two thousand and three.

Secretary of State

200311100069 59

03 DFC 12 AM 0: 00