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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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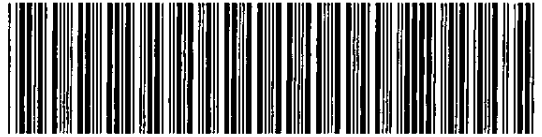
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/28

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BASICALLY BATS - WILDLIFE CONSERVATION SOCIETY, INC.
(Name of Corporation – must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

SUSAN M. BARNARD

(Name of Person)

BASICALLY BATS - WILDLIFE CONSERVATION SOCIETY, INC.

(Firm/Company)

106 SPOONER ROAD

(Address)

HAWTHORNE, FL 32640

(City/State and Zip Code)

For further information concerning this matter, please call:

SUSAN M. BARNARD

(Name of Person)

at (352) 481-2913

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**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. **BASICALLY BATS - WILDLIFE CONSERVATION SOCIETY, INC.**

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. **GEORGIA**

(State or country under the law of which it is incorporated)

3. **58-2143928**

(FEI number, if applicable)

4. **10/03/1994**

(Date of Incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. **106 SPOONER ROAD, HAWTHORNE, FL 32640**

(Principal office address)

106 SPOONER ROAD, HAWTHORNE, FL 32640

(Current mailing address)

8. CHARITABLE, EDUCATIONAL, AND SCIENTIFIC PURPOSES WITHIN THE MEANING OF THE OF SECTION 501(C)(3) OF THE IRS CODE OF 1981

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: **SUSAN M. BARNARD**

Office Address: **106 SPOONER ROAD**

HAWTHORNE

(City)

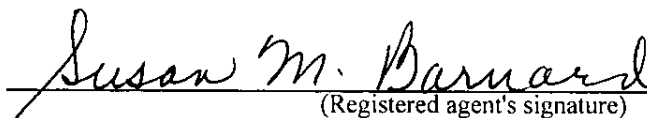
, Florida **32640**

(Zip Code)

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TALLAHASSEE, FLORIDA

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

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: _____

Address: _____

Director: SCOTT WRIGHT

Address: 1420 HUNTERS FORD
STONE MOUNTAIN, GA 30088

Director: TAMARA ROMAIN

Address: 15305 NW 5TH AVE
NEWBERRY, FL 32669

Director: ELIZABETH HARTMAN

Address: 1553 HARTMAN DRIVE
LILBURN, GA 30047

B. OFFICERS

President: ANN GARNER

Address: 855 MOUNTAINBROOKE DRIVE
STONE MOUNTAIN, GA 30087-2818

Vice President: DR. STEPHEN BURNETT

Address: 5900 N. LEE STREET
MORROW, GA 30260

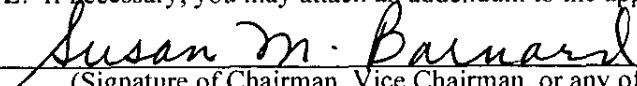
Secretary: LINDA PACE

Address: 146 GREENWOOD AVENUE, DECATUR, GA 30030

Treasurer: SUSAN M. BARNARD (EXEC. DIRECTOR/TREASURER)

Address: 106 SPOONER ROAD, HAWTHORNE, FL 32640

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. SUSAN M. BARNARD (EXEC. DIRECTOR/TREASURER)
(Typed or printed name and capacity of person signing application)

STATE OF GEORGIA

Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

BASICALLY BATS - WILDLIFE CONSERVATION SOCIETY, INC.

Domestic Non-Profit Corporation

was formed or was authorized to transact business on 10/03/1994 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 15th day of November, 2007

Karen C Handel
Secretary of State