## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000005504

Apr 21, 2009 Secretary of State

Entity Name: DAYTONA BEACH BUTTERFLY CONSERVATORY AND EDUCATIONAL FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 111 N. ST. ANDREWS DRIVE ORMOND BEACH, FL 32174 **Current Mailing Address: New Mailing Address:** 111 N. ST. ANDREWS DRIVE ORMOND BEACH, FL 32174 FEI Number: 59-3676516 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: KUNDID, MICHAEL A HERRERO, MELISSA 111 N.ST.ANDREWS DRIVE 444 SEABREEZE BOULEVARD US SUITE 800 ORMOND BEACH, FL 32174 DAYTONA BEACH, FL 32118 US 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: MELISSA HERRERO 04/21/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ZIRKELBACH, RICHARD Name: Name: 1420 NEW BELLEVUE ROAD #2001 Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition HERRERO, MELISSA Name: Name: Address: 111 N. ST., ANDREWS DRIVE Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: () Delete Title: () Change () Addition **RUTH BON FLEUR** Name: Name: 5750 SWEETWATER BOULEVARD Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: ( ) Delete Title: Title: () Change () Addition CUNNINGHAM, JAMES Name: Name: 4923 SAILFISH DR Address: Address: City-St-Zip: POCE INLET, FL 32127 City-St-Zip: Title: () Delete Title: () Change () Addition GREINER, GLENN Name: Name: 1301 KILLBRICKEN CIRCLE Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: ( ) Delete Title: () Change () Addition PEMBROKE, WILLIAM G C.P.A. Name: Name: Address: 1922 SE PORT ST. LUCIE BLVD. Address: PORT ST. LUCIE, FL 34952 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD ZIRKELBACH **PRES** 04/21/2009 Date