2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000457

Entity Name: TRI-STATE AVIAN SOCIETY, INC.

Apr 17, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4830 FRED GEORGE RD 1530 MCLAWRENCE WAY TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32317

Current Mailing Address: New Mailing Address:

P.O. BOX 7544

TALLAHASSEE, FL 323147544

FEI Number: 59-3695516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MAPLES, CHRISTINE BUCHANAN, DARYL J 4830 FRÉD GEORGE RD 1530 MCLAWRENCE WAY US US TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32317

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: DARYL J. BUCHANAN 04/17/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DURAND, BECKY LASTER, BARRY Name: Name: 8708 WALTHAM CT Address: 10508 LAKE IAMONIA DR Address:

City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: TALLAHASSEE, FL 12

Title: () Delete Title: () Change () Addition

CROUCH, BOB Name: Name: Address: 243 POND CT Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

WILLIAMS, BRENDA Name: RAMSDELL, DIANA Name: 53 BOSTIC PELT RD 1467 CRESTVIEW AVE Address: Address: City-St-Zip: CRAWFORDVILLE, FL City-St-Zip: TALLAHASSEE, FL 32303

Title: () Delete Title: (X) Change () Addition

MAPLES, CHRISTINE MAPLES, CHRISTINE Name: Name: 4830 FRED GEORGE RD. Address: 4830 FRED GEORGE RD. Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

Title: () Delete Title: (X) Change () Addition

RAMSDELL, DIANA WILSON, GENE Name: Name: 1467 CRESTVIEW AVE 1711 BROOKSIDE BLVD Address: Address: TALLAHASSEE, FL 32303 City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32301

() Delete Title: (X) Change () Addition SMITH, TIM RUBIN, SUSAN Name: Name: Address: 809 APPLE ST Address: 537 OAKLAND AVE TALLAHASSEE, FL 32317 City-St-Zip: TALLAHASSEE, FL 32301 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: BARRY LASTER Т 04/17/2007