

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004934

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: FLORIDA WEST COAST AVIAN SOCIETY, INC.

## Current Principal Place of Business:

4757 DUNN DRIVE  
SARASOTA, FL 34233

## New Principal Place of Business:

4757 DUNN DRIVE  
SARASOTA, FL 342331430 US

## Current Mailing Address:

P.O. BOX 18145  
SARASOTA, FL 34276

## New Mailing Address:

P.O. BOX 18145  
SARASOTA, FL 342761145 US

FEI Number: 65-1124976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BASTIS, KAREN L  
4757 DUNN DRIVE  
SARASOTA, FL 34233 US

## Name and Address of New Registered Agent:

BASTIS, KAREN L  
4757 DUNN DRIVE  
SARASOTA, FL 342331430 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: KAREN L BASTIS

04/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DS ( ) Delete  
Name: UHRMAN, DAVID  
Address: 1214 37TH ST WEST  
City-St-Zip: BRADENTON, FL 34205

Title: VP ( ) Delete  
Name: HYMAN, GINI  
Address: 2448 FOSTER LANE  
City-St-Zip: SARASOTA, FL 34239

Title: DP ( ) Delete  
Name: LEWIS, LYNDIA A  
Address: 5077 BUNYAN WAY  
City-St-Zip: SARASOTA, FL 34232

Title: DT ( ) Delete  
Name: BASTIS, KAREN  
Address: 4757 DUNN DRIVE  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: PRUITT, JUNE  
Address: 2719 60TH AVE TERRACE W  
City-St-Zip: BRADENTON, FL 34207

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: KAREN L BASTIS

DT

04/28/2009

Electronic Signature of Signing Officer or Director

Date