

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90099 023 ****61.25

DOCUMENT # N03000001268

1. Entity Name
**ORGANIZATION OF PROFESSIONAL AVICULTURISTS,
INC.**



Principal Place of Business
1472 E Road
LOXAHATCHEE, FL 33470 US

Mailing Address
PO BOX 927
LITTLETON, NC 27850



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05092007

Chg-NP

CR2E037 (12/06)

4. FEI Number
30-0152089

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VOREN, HOWARD J
1472 E Road
LOXAHATCHEE, FL 33470

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Howard Voren **Howard VOREN**

5/9/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME VOREN, HOWARD J
STREET ADDRESS 1472 "E" ROAD
CITY-ST-ZIP LOXAHATCHEE, FL 33470

TITLE D ☒ Delete
NAME DESBOROUGH, LAURELLA
STREET ADDRESS 2072 BLUE KNOLL ROAD
CITY-ST-ZIP MIDDLEBURG, FL 32068

TITLE VD ☐ Delete
NAME HUNTER, KIM
STREET ADDRESS 1431 MCCLOSKEY RD
CITY-ST-ZIP HOLLISTER, CA 95023

TITLE SD ☐ Delete
NAME SEGER, LINDA
STREET ADDRESS 1977 FAULCON RD
CITY-ST-ZIP LITTLETON, NC 27850

TITLE T ☒ Delete
NAME BALABAN, GLORIA
STREET ADDRESS 6048 DUCKWEED RD
CITY-ST-ZIP LAKE WORTH, FL 34647

TITLE D ☐ Delete
NAME PATTISON, JEAN
STREET ADDRESS 6615 NEW TAMPA HWY
CITY-ST-ZIP LAKELAND, FL 33810

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Wall, Genny
STREET ADDRESS 2351 Paseo de Valencia, Ste 210
CITY-ST-ZIP Laguna Hills, CA 92653

TITLE V ☐ Change ☒ Addition
NAME Beaulieu, Sue
STREET ADDRESS 235 Winward Dr.
CITY-ST-ZIP Newton, KS. 67114

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Howard Voren **Howard VOREN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/07

Date

561-541-3090

Daytime Phone #