

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

APPROVAL
03-16-2007 9:00:25 AM *****70.00
FILED

DOCUMENT # N04000005471 1. Entity Name BIRD LOVERS CLUB, INC.						07 MAR 23 PM 3: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2261 SW 87TH AVENUE DAVIE, FL 33324				Mailing Address 2261 SW 87TH AVENUE DAVIE, FL 33324			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country					
4. FEI Number 20-1187616				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				03012007 Chg-NP CR2E037 (12/06)			
6. Name and Address of Current Registered Agent VELELLA, V. MESQ. 609 NW 8TH STREET DANIA BEACH, FL 33004				7. Name and Address of New Registered Agent Name DOMENICK PALUMBO Street Address (P.O. Box Number is Not Acceptable) 2261 SW 87 AVE City DAVIE FL 33324			
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 <u>DOMENICK PALUMBO</u> <u>DOMENICK PALUMBO</u> <u>3/03/07</u> <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALUMBO, DOMENICK 2261 SW 87TH AVENUE DAVIE, FL 33324	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALAN MEROLA 3088 LAKE SHORE DRIVE DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WEIGEL, RICHARD O JR. 301 SW 5TH ST HALLANDALE BEACH, FL 33321	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARRIE EFSTATHION 3400 SW 139 AVE. MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PALUMBO, SUSAN 2261 SW 87TH AVENUE DAVIE, FL 33324	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER MICHAEL VIGIONE 3088 LAKE SHORE DRIVE DEERFIELD BEACH, FL 33442			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMS BOWDEN, MARK 301 SW 5TH ST HALLANDALE, FL 33321	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEISE, JANET 4500 POLK STREET HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete						
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: <u>Alan L. Merola</u> <u>Alan L. Merola</u> <u>3/3/2007</u> <u>(954) 596-0341</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SORING OFFICER OR DIRECTOR Date Daytime Phone #</small>							

Document corrected per Susan Palumbo. psc