

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009063

FILED
Jul 11, 2005
Secretary of State

Entity Name: THE IBIS WILDLIFE FOUNDATION, INC.

Current Principal Place of Business:

8002 SANDHILL WAY EAST
PALM BEACH, FL 33412

New Principal Place of Business:

Current Mailing Address:

8002 SANDHILL WAY EAST
PALM BEACH, FL 33412

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ERDMAN, PATRICIA
8002 SANDHILL WAY EAST
PALM BEACH, FL 33412 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: PRESTON, SANDY
Address: 8002 SANDHILL WAY EAST
City-St-Zip: PALM BEACH, FL 33412

Title: C () Delete
Name: LIEBERMAN, CINDI
Address: 8002 SANDHILL WAY EAST
City-St-Zip: PALM BEACH, FL 33412

Title: S () Delete
Name: LERNER, LISA-MARIE
Address: 8002 SANDHILL WAY EAST
City-St-Zip: PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change () Addition
Name: SACHER, HARRIET
Address: 8002 SANDHILL WAY EAST
City-St-Zip: PALM BEACH, FL 33412

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LISA-MARIE LERNER

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07/11/2005

Electronic Signature of Signing Officer or Director

Date