

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06668

FILED
Mar 31, 2009
Secretary of State

Entity Name: MANATEE COUNTY AUDUBON SOCIETY, INC.

Current Principal Place of Business:

FIRST PRESBYTERIAN CHURCH
1402 MANATEE AVE WEST
BRADENTON, FL 34210 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 14550
BRADENTON, FL 34280 US

New Mailing Address:

FEI Number: 59-2562597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOMBACHER, LUCETTE M
3431 92ND AVE E
PARRISH, FL 34219 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: D () Delete
Name: SCHNIEDER, JOHN F
Address: 511 49TH ST WEST
City-St-Zip: BRADENTON, FL 342093837

Title: D () Delete
Name: SCHNEIDER, BUNNY
Address: 511 49TH ST W
City-St-Zip: BRADENTON, FL 34209

Title: PD () Delete
Name: BLACK, STEVE
Address: 4823 HOYER DR
City-St-Zip: SARASOTA, FL 342419222

Title: VD () Delete
Name: FLISIK, ARLENE
Address: 4106 24TH AVE W
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: SINGER, BARBARA
Address: 4458 COCOA RIDGE CIR
City-St-Zip: SARASOTA, FL 34233

Title: VD () Delete
Name: HEITZMAN, TOM
Address: 10824 ERIE RD
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: WOMBACHER, LUCETTE M
Address: 3431 92ND AVE E
City-St-Zip: PARRISH, FL 34219

Title: SD (X) Change () Addition
Name: MCNALLY, TAMI
Address: 806 ALBRITTON AVE
City-St-Zip: SARASOTA, FL 34232

Title: VD (X) Change () Addition
Name: BLACK, STEVE
Address: 4823 HOYER DR
City-St-Zip: SARASOTA, FL 342419222

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

Title: PD (X) Change () Addition
Name: SINGER, BARBARA
Address: 4458 COCOA RIDGE CIR
City-St-Zip: SARASOTA, FL 34233

Title: D (X) Change () Addition
Name: HEITZMAN, TOM
Address: 10824 ERIE RD
City-St-Zip: PARRISH, FL 34219

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: LUCETTE M WOMBACHER

T

03/31/2009

Electronic Signature of Signing Officer or Director

Date