

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006997

FILED  
Jul 03, 2009  
Secretary of State

**Entity Name:** AFRICAN WILDLIFE CONSERVATION FUND, INC.

**Current Principal Place of Business:**

10564 N.W. 57TH STREET  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

10564 N.W. 57TH STREET  
DORAL, FL 33178

**New Mailing Address:**

**FEI Number:** 26-0571535      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

**Name and Address of New Registered Agent:**

ROMANACH, ANTONIO J  
14805 S.W. 212TH STREET  
MIAMI, FL 33187      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPED      ( ) Delete  
Name: ROMANACH, ANTONIO J  
Address: 10564 N.W. 57TH STREET  
City-St-Zip: DORAL, FL 33178

Title: D      ( ) Delete  
Name: BRYANT, MARTHA  
Address: 2285 S.E. 5TH COURT  
City-St-Zip: HOMESTEAD, FL 33033

Title: D      ( ) Delete  
Name: VENTRIERE, CHRISTINA  
Address: 14805 S.W. 212 ST  
City-St-Zip: MIAMI, FL 33187

Title: DS      ( ) Delete  
Name: STOKY, II, ROBERT C  
Address: 103900B OVERSEAS HIGHWAY  
City-St-Zip: KEY LARGO, FL 33037

Title: D      ( ) Delete  
Name: WINZER, INGO  
Address: 60 BRATTLE STREET #605  
City-St-Zip: CAMBRIDGE, MA 02138 US

Title: D      ( ) Delete  
Name: STOKY, RUTH  
Address: 14 RAINBOW DRIVE  
City-St-Zip: KEY LARGO, FL 33037 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: ANTONIO J. ROMANACH

DPED

07/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date