

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000002295

**FILED**  
**Feb 14, 2010**  
**Secretary of State**

**Entity Name:** SAVE OUR LOCAL WETLANDS CORP.

**Current Principal Place of Business:**

662 BOCA CIEGA POINT BLVD SOUTH  
SAINT PETERSBURG, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

662 BOCA CIEGA POINT BLVD SOUTH  
SAINT PETERSBURG, FL 33708

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BUSBY, NORA A DR.  
662 BOCA CIEGA POINT BLVD SOUTH  
SAINT PETERSBURG, FL 33708 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: P  
Name: BUSBY, NORA A DR.  
Address: 662 BOCA CIEGA POINT BLVD SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: VP  
Name: HYLAND, JANET L  
Address: 662 BOCA CIEGA POINT BLVD SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: S  
Name: MOGILSKI, CLARA L  
Address: 564 BOCA CIEGA POINT BLVD SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33708

I hereby 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 all other like empowered.

**SIGNATURE:** JANET HYLAND

VP

02/14/2010

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

\_\_\_\_\_  
Date