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Feb 04 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N08867 (6)

MARJORY STONEMAN DOUGLAS BISCAYNE NATURE CENTER, INC.



Principal Place of Business Mailing Address
P.O. BOX 330582 MIAMI FL 33233-0582

3. Date Incorporated or Qualified 04/19/1985
4. FEI Number 59-2549600
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
DANON, SAM
701 BRICKELL AVE
29TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
I INTRIAGO, JOY 1895 ESPANOLA DRIVE MIAMI FL
D GRAFTON, THORN 69 SW 11 STR MIAMI FL
SD MORRISON, CHARLES D. JR 10450 S.W. 98TH TERR. MIAMI FL
DP BEZOLD, RICHARD 200 S. BISCAYNE BLVD. MIAMI FL
V DANON, SAM 701 BRICKELL AVE. MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE 5
1.2 NAME Mary Alice Manella
1.3 STREET ADDRESS 11745 SW 110 Lane
1.4 CITY-ST-ZIP Miami, FL 33176
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE VP
3.2 NAME Ian Schweid
3.3 STREET ADDRESS City National Bank, 25 W Flagler St.
3.4 CITY-ST-ZIP Miami, FL 33130
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME Mark E. Murphy
5.3 STREET ADDRESS McClain & Company
5.4 CITY-ST-ZIP 200 S. Biscayne Blvd., Miami, FL 33131
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (10/97)