

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08867

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** MARJORY STONEMAN DOUGLAS BISCAYNE NATURE CENTER, INC.

**Current Principal Place of Business:**

6767 CRANDON BLVD  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

6767 CRANDON BLVD  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

FEI Number: 59-2549600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JAMES, TILGHMAN  
ONE S. E. 3RD AVENUE  
SUITE 3000  
MIAMI, FL 33131 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: KUSHLAN, JAMES A  
Address: P. O. BOX 2008  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP  
Name: SORKIN, STEPHEN  
Address: 4721 UNIVERSITY DRIVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: S  
Name: MORRISON, CHARLES  
Address: 10450 SW 96 TERRACE  
City-St-Zip: MIAMI, FL 33176

Title: T  
Name: STEVEN, HENRIQUEZ  
Address: 6767 CRANDON BLVD.  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ED  
Name: LONG, THEODORA  
Address: 6767 CRANDON BLVD  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D  
Name: GRAFTON, THORN  
Address: 2814 CHUCUNANTAH AVE.  
City-St-Zip: MIAMI, FL 33133

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: THEODORA LONG

ED

01/06/2010

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

\_\_\_\_\_  
Date