

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16748

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: EXOTIC BIRD CLUB OF FLORIDA, INC.

## Current Principal Place of Business:

1275 CULVER RD  
PALM BAY, FL 32905 US

## New Principal Place of Business:

## Current Mailing Address:

P.O.BOX 1177  
MELBOURNE, FL 32902

## New Mailing Address:

FEI Number: 59-2873753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WARD, BARBARA M  
495 BREAKWATER STREET SE  
PALM BAY, FL 32909 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 ( ) Delete  
Name: BISHOP, JUDY  
Address: 6870 CREPE MYRTLE DR.  
City-St-Zip: GRANT, FL 32949

Title: D ( ) Delete  
Name: COX, DEBBIE  
Address: 1212 SEAHOUSE STREET  
City-St-Zip: SEBASTIAN, FL 32958

Title: D ( ) Delete  
Name: PRENDERGAST, JAMES  
Address: 723 JAPONICA DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: T ( ) Delete  
Name: WARD, BARBARA M  
Address: 495 BREAKWATER ST.SE  
City-St-Zip: PALM BAY, FL 32909

Title: S ( ) Delete  
Name: MOODY, JERRY  
Address: 610 VERBENIA DRIVE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: MERCIER, DON  
Address: 5440 HOLDEN ROAD  
City-St-Zip: COCOA, FL 32927

## 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: V (X) Change ( ) Addition  
Name: MOODY, JERRY  
Address: 610 VERBENIA DRIVE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S (X) Change ( ) Addition  
Name: WEIR, YVONNE  
Address: 570 E. MERRIMAC DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32952

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: BARBARA M. WARD

TREA

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date