FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCU	MENT # N3505	7 (1)							
ASSOCIATION FOR TROPICAL LEPIDOPTERA, INC.									
					1 1884 1844 8141	Baha i Baha d a a bahai	Bara baran bar		
Principal Place of Business Mailing Address						8884 BIII 1881 BIRI			
% JOHN B.		PO BOX 141210							
1911 S.W. 34TH ST. GAINESVILLE FL 32614 GAINESVILLE FL 32608 US									
					3. Date incorporated or Qu 11/02/1989	ualified 3a.	Date of Last		
Principal Place of Business 2a. Mailing Address				•	4. FEI Number		05/01/1	Applied For	
21 Cuito Ast					1 50 0000004			Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Des	sired 🔲		5 Additional	
City & State City & State					6. Election Campaign Final			Required	
23		28			Trust Fund Contribution	icing 🗆		May Be ed to Fees	
Zip 24	Country 25	Zip	Countr	У	This corporation has liab		tax under s.		
24 25 29 30 9. Name and Address of Current Registered Agent					Florida Statutes Yes No 10. Name and Address of New Registered Agent				
				Name		HOW HORISTOILE	O Agent		
HEPPNER, JOHN B.				Street	Address (P.O. Box Number is Not A	ocentable)			
1911 S.W. 34TH ST.					Trace coop For Don Harrison to Hot Fr				
GAINESVILLE FL 32608			83]					
			84	City			85 Zip	p Code	
11. Pursuant	to the provisions of Sections 617.0502 a	and 617.1508, Florida Statut	es, the above	named c	orporation submits this statement for	the numose of a		registered office	
	red agent, or both, in the State of Florida ith, and accept the obligations of, Sectio			oration's	board of directors. I hereby accept t	he appointment	as registered	agent. I am	
SIGNATURE .									
12.	Signature, typed or printed name of registered agent ar OFFICERS AND			nt signature	required when reinstating?	DATE			
TITLE	DSTC	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES	TO OFFICERS A			
NAME	4.4555		1.2 NAME		MIELKE OLAF H. H	}	Change	⊠ Addition	
STREET ADDRESS	101 NW 28TH TERRACE			T ADDRESS	Univ. Fed. do Paran	. C.P. C	وده		
CITY-ST-ZIP	GAINESVILLE FL		1.4 CITY-	ST-ZIP	Curitiba SP BR	1216			
TITLE	D DELETE 2:		2.1 TITLE		D		Change	Addition	
NAME	DAVIS, DON R.		2.2 NAME		MWROE, Engene 6	2.			
STREET ADDRESS	PET 1 OF ENTOMOLOGI, TOTA & CONSTITUTION			ADDRESS	3093 Barlow Cresce	ut, R.R.	1		
CITY-ST-ZIP TITLE	WASHINGTON DC D	DELETE	2. 4 CITY- 3.1 TITLE	ST-ZIP	Dunrobin, QU, CA	IABA A	GA ITA		
NAME	ELIAZAR, P. J	LJotter	3.2 NAME		BECKER VITOR D		☐ Change	Addition	
STREET ADDRESS				ADDRESS		08223			
CITY-ST-ZIP				ST-ZIP		RIZIL			
TITLE	D	DELETE	4.1 TITLE		DVP		☐ Change	Addition	
NAME	DRUMMOND, B. A		4. 2 NAME					i	
STREET ADDRESS	P. O. BOX 9061		4.3 STREE	ADDRESS	EMMEL, Thomas C univ. of Florida Dept Gainesville, FL 32	- 1 2000g	ク	[
CITY-ST-ZIP TITLE	WOODLAND PARK CO	DELETE	4.4 CITY - 5	T-ZIP	Gainesville, FL 3:	-611			
NAME	D Lamas, Gerado		5.1 TITLE 5.2 NAME				Change	☐ Addition	
STREET ADDRESS	MUSEO HISTORIA NATURAL, A	APDS 14-0494	5.2 NAME 5.3 STREET	ADORESS					
CITY-ST-ZIP	LIMA. PERU	* PO 14:0101	5.4 CITY - S						
TITLE	D	S OELETE	61 TITLE		P	····	Change	Addition	
NAME	LEMAIRE, CLAUDE		62 NAME		Farmer, In S.		-		
STREET ADDRESS	LA CROIX DEX BAUX		6.3 STREET	ADDRESS	James, In d. 310 Cole dr SF. Huntsville, AL 3.			ļ	
CITY-ST-ZIP 14. L do hereby	GORDES, FRANCE v certify that the information supplied with	h this filing is voluntarily form	6.4 CITY - S	2 201 200					
oorang anac	y certify that the information supplied wit the information indicated on this annual am an officer or director of the corporate	report of Suddiememai annu	Jai redontis m	e and ac	uity for the exemption stated in Section	n 119.07(3)(k), F		s. I further made under	

appears in Block 12 or Block 13 if changed, or of an attachment with an address.

SIGNATURE!

SIGNATURE AND TYPELL OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. B. Heppner 4/16/96 (352) 372-3505