

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39884

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: SAVE OUR SEABIRDS, INC.

**Current Principal Place of Business:**

840 THIRD AVENUE SOUTH  
TIERRA VERDE, FL 33715

**New Principal Place of Business:**

2709 CR 579  
WIMAUMA, FL 33598

**Current Mailing Address:**

840 THIRD AVENUE SOUTH  
TIERRA VERDE, FL 33715

**New Mailing Address:**

2709 CR 579  
WIMAUMA, FL 33598

FEI Number: 59-3078536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOX, LEE  
840 THIRD AVENUE SOUTH  
TIERRA VERDE, FL 33715 US

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

FOX, LEE  
2709 CR 579  
WIMAUMA, FL 33598 US

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: LEE FOX

04/04/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FOX, LEE,  
Address: 840 THIRD AVENUE SOUTH  
City-St-Zip: TIERRA VERDE, FL

Title: D ( ) Delete  
Name: PENNY, ANN  
Address: 731 64TH AVE  
City-St-Zip: ST PETERSBURG, FL

Title: D ( ) Delete  
Name: CASTRO, NANCY  
Address: 1505 BM COLONIAL TERR  
City-St-Zip: ARLINGTON, VA 22209

Title: D ( ) Delete  
Name: PENNY, JACK D  
Address: 731 64TH AVE.  
City-St-Zip: ST. PETERSBURG BEACH, FL

Title: D ( ) Delete  
Name: BYRNE, JAMES  
Address: 5040 FOURTH ST N  
City-St-Zip: ST PETERSBRUG, FL 33701

Title: D ( ) Delete  
Name: MCCRORY, RICHARD  
Address: 540 FOURTH ST N  
City-St-Zip: ST PETERSBURG, FL 33701

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: FOX, LEE,  
Address: 2709 CR 579  
City-St-Zip: WIMAUMA, FL 33598

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: CASTRO, NANCY  
Address: 718 CAT TAIL COURT NE  
City-St-Zip: ST PETERSBURG, FL 33703

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LEE FOX

PRES

04/04/2006

Electronic Signature of Signing Officer or Director

Date