

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N44577 (7)**
1. Corporation Name
AUDUBON FOUNDATION FOR THE ENVIRONMENT, INC.



Principal Place of Business
**1300 N.W. 6TH ST.
BOCA RATON FL 33486**

Mailing Address
**1300 N.W. 6TH ST.
BOCA RATON FL 33486**

3. Date Incorporated or Qualified
08/06/1991

3a. Date of Last Report
04/24/1995

2. Principal Place of Business
21 7586 SIERRA DRIVE

2a. Mailing Address
26 7586 SIERRA DRIVE

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23 BOCA RATON, FL

City & State
28 BOCA RATON, FL

Zip
24 33433

Country
25 US

Zip
29 33433

Country
30 US

4. FEI Number
65-0311971

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**MAURER, JANI E. ESQ.
1489 W. PALMETTO PARK ROAD
SUITE 440
BOCA RATON FL 33486**

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

Signature, typed or printed name of registered agent and title if applicable:

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PD
HUNT, SOPHIA
1300 N.W. 6TH ST6
BOCA RATON FL**

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**TD
KAMEN, ADELINE
14721 BONAIRE BLVD.
DELRAY BEACH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
PEYTON, ANN
446 N.W. 5TH AVE
BOCA RATON FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**SD
PARMALEE, ALAN
4765 N.W. 6TH CT
DELRAY BEACH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
GELLER, HERMAN
14425 STRATHMORE LANE
DELRAY BEACH FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE **PD** ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME **TD
GEORGE O'ROURKE**

6.3 STREET ADDRESS **7586 SIERRA DRIVE**

6.4 CITY - ST - ZIP **BOCA RATON, FL 33433**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE J. O'ROURKE

Date:

5/15/96

Daytime Phone #

407-293-2047

CR2E037 (12/95)