

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90135 025 ****61.25

DOCUMENT # N48637

1. Entity Name

FLORIDA CONSERVATION COUNCIL, INC.



Principal Place of Business

**2019 6TH AVE SO
LAKE WORTH FL 33461**

Mailing Address

**2019 6TH AVE SO
LAKE WORTH FL 33461**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SNYDER, ROBERT C
2019 6TH AVE SOUTH
LAKE WORTH FL 33461**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robert Snyder

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-28-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **D LINLEY, GEORGE**
STREET ADDRESS **15140 71ST DRIVE NORTH**
CITY-ST-ZIP **PALM BEACH GARDENS FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D WRIGHT, BISHOP**
STREET ADDRESS **15439 94TH STREET NORTH**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D BRADER, JOSEPH**
STREET ADDRESS **11295 ERA LANE**
CITY-ST-ZIP **LAKE WORTH FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **P SNYDER, ROBERT**
STREET ADDRESS **2019 6TH AVENUE SOUTH**
CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **VSD WORRELL, TOM**
STREET ADDRESS **3350 NW 168 CT**
CITY-ST-ZIP **OKEECHOBEE FL 33461**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **DT JONES, KITH**
STREET ADDRESS **1900 HIGH RIDGE ROAD**
CITY-ST-ZIP **LAKE WORTH FL 33462**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Snyder **ROBERT C. SNYDER**

3-28-03 561 582 9556

CR2037 (10/02)