2002 UNIFORM BUSINESS REPORT (UBR) FILED May 29, 2002 8:00 am Secretary of State **DOCUMENT # N50451** 1. Entity Name MONROE COUNTY ENVIRONMENTAL EDUCATION ADVISORY C 05-29-2002 90678 008 ****70.00 OUNCIL, INC. Principal Place of Business Mailing Address C/O SEACAMP ASSN., INC. C/O SEACAMP ASSN., INC 1300 BIG PINE AVE 1300 BIG PINE AVE BIG PINE KEY FL 33043-3336 BIG PINE KEY FL 33043 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0386780 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HOOPER, IRENE 1300 BIG PINE AVE **BIG PINE KEY FL 33043-3336** City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (9/01) TITLE ☐ Delete TITLE Change Addition DIERSING, BRYANT Diensing, Bryant NAME NAME 20 N OCEAN DRIVE **CR2E037** STREET ADDRESS STREET ADDRESS 20 N. Ocean Drive CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-ZIP Kiy Lango, FL 33037 SD Addition TITLE ☐ Delete TITLE Change Tatgenhorst, Joy NAME NAME Gallagher, Danl #371 69TH ST STREET ADDRESS STREET ADDRESS 58193 Ferrierre MARATHON FL 33050 CITY-ST-ZIP CITY-ST-ZIP Mussy Key Delete TITLE TITLE Change Addition Director WILLIAMS, MARY LEIGH Ford , Fran . 12an Washington St. NAME NAME 2072 PALM BEACH RD STREET ADDRESS STREET ADDRESS **BIG PINE KEY FL 33043** CITY-ST-ZIF CITY-ST-ZIP KiyWest, FL 33040 TD ☐ Delete ☐ Change ☐ Addition TITLE HOOPER, IRENE NAME NAME 1300 BIG PINE AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BIG PINE KEY FL 33043** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF 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.

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Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE: