

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 # N93000000868 (0)

1. Corporation Name
EVERGLADES WILDLIFE REFUGE, INC.



Principal Place of Business: **1021 S. BISCAYNE RIVER DR. MIAMI FL 33169**
Mailing Address: **1021 S. BISCAYNE RIVER DR. MIAMI FL 33169**

3. Date Incorporated or Qualified: **03/10/1993**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21 **35601 SW 192 AV**
Suite, Apt. #, etc.
22
City & State
23 **Florida City, FL**
Zip
24 **33034** Country
25 **Dade**
26
27
City & State
28
Zip
29
Country
30

4. FEI Number: **65-0503733**
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
FREER, ROBERT W JR
1021 S. BISCAYNE RIVER DR.
MIAMI FL 33169

10. Name and Address of New Registered Agent
81 Name: **FREER ROBERT W JR.**
82 Street Address (P.O. Box Number is Not Acceptable): **35601 SW 192 AV**
83
84 City: **Florida City** FL 85 Zip Code: **33034**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREER, ROBERT W JR	1.2 NAME	
STREET ADDRESS	1021 S. BISCAYNE RIVER DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33169	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANSEY, BARBARA	2.2 NAME	
STREET ADDRESS	1021 S. BISCAYNE RIVER DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33169	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POWERS, MELISSA	3.2 NAME	
STREET ADDRESS	1021 S. BISCAYNE RIVER DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33169	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIERCE, JAMES R JR	4.2 NAME	
STREET ADDRESS	CPA-48 NE 15 ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOMESTEAD FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAJAS, LEE S	5.2 NAME	
STREET ADDRESS	1021 S BISCAYNE BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: Robert W Freer Jr Date: 2/29/96 Daytime Phone #: 305 247 2628

CR2E037 (12/95)