

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001811

FILED
Jan 27, 2006
Secretary of State

Entity Name: ST. LUCIE AUDUBON SOCIETY, INC.

Current Principal Place of Business:

P O BOX 12474
FT PIERCE, FL 34979 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 12474
FT PIERCE, FL 34979 US

New Mailing Address:

FEI Number: 59-2724655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRICKSON, KEVIN H ESQ.
210 ORANGE AVE.
FT. PIERCE, FL 34950 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PARMENTIER, AL
Address: 5103 INDIAN BEND LANE
City-St-Zip: FORT PIERCE, FL 34951

Title: DT () Delete
Name: PRINCE, RICHARD A
Address: 8800 OKEECHOBEE RD. #26
City-St-Zip: FT PIERCE, FL 34945

Title: DVP () Delete
Name: DUNLEAVY, LIZ
Address: 4105 GATOR TRACE RD.
City-St-Zip: FORT PIERCE, FL 34982

Title: DS () Delete
Name: ALDERMAN, MISTY
Address: 7103 ARTHURS RD.
City-St-Zip: FORT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DS (X) Change () Addition
Name: BROWN, TERRI
Address: 642 SW SARAGOSSA AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: RICHARD A PRINCE

DT

01/27/2006

Electronic Signature of Signing Officer or Director

Date