

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



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

95 MAY -1 PM 12: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000002742 (5)

1. Corporation Name

**MARJORY STONEMAN DOUGLAS ENVIRONMENTAL EDUCATION
FUND, INC.**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/17/1993** 3a. Date of Last Report **03/16/1994**

4. FEI Number 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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

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

Principal Place of Business Mailing Address
4021 LAGUNA STREET CORAL GABLES FL 33146

2. Principal Place of Business 2a. Mailing Address

21. City, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

24. Country 25. Zip 29. Country 30. Zip

9. Name and Address of Current Registered Agent

**FELLMAN, BARRY
4021 LAGUNA STREET
CORAL GABLES FL 33146**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOUGLAS, MARJORY S	12 NAME	
STREET ADDRESS	4021 LAGUNA STREET	13 STREET ADDRESS	
CITY - ST - ZIP	CORAL GABLES FL 33146	14 CITY - ST - ZIP	
TITLE	VD	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FELLMAN, BARRY	22 NAME	
STREET ADDRESS	4021 LAGUNA STREET	23 STREET ADDRESS	
CITY - ST - ZIP	CORAL GABLES FL 33146	24 CITY - ST - ZIP	
TITLE	SD	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIG, JENNIFER	32 NAME	
STREET ADDRESS	4021 LAGUNA STREET	33 STREET ADDRESS	
CITY - ST - ZIP	CORAL GABLES FL 33146	34 CITY - ST - ZIP	
TITLE	TD	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AERENSON, BENJAMIN	42 NAME	
STREET ADDRESS	4021 LAGUNA STREET	43 STREET ADDRESS	
CITY - ST - ZIP	CORAL GABLES FL 33146	44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

600001487976
-05/16/95--01008--006
*****68.75 *****68.75

Signature

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 110.07(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 **Barley Fellman**

4-7-95

305-446-6411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #