

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

**FILED**  
**Jan 17, 2003 8:00 am**  
**Secretary of State**

01-17-2003 90087 030 \*\*\*\*61.25

**DOCUMENT # N93000005602**

1. Entity Name

**MARINE MAMMAL RESCUE FOUNDATION OF THE UPPER KEY  
S, INC.**



Principal Place of Business

**31 CORRINE PLACE  
KEY LARGO FL 33037**

Mailing Address

**31 CORRINE PLACE  
KEY LARGO FL 33037**

**90004719**



☐ CHECK HERE IF MAKING CHANGES

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 **65-0455644**

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

**COOPER, ARTHUR  
31 CORRINE PLACE  
KEY LARGO FL 33037**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PT	COOPER, ARTHUR	1631 NW 19TH ST	HOMESTEAD FL 33030				
D	HOAGLAND, PETER	67 BASS AVE	KEY LARGO FL 33037				
SD	VALLES, BETTINA	20 FISHERMAN TRAIL	KEY LARGO FL 33037				
DIRECTOR	LANE, KYLE	76 SHORELAND DR.	KEY LARGO, FL 33037				
DIRECTOR	LINGENFELSER, ROBERT	162200 OVERSEAS HWY.	KEY LARGO, FL 33037				

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: *Arthur Cooper Pres.* 1-14-03 305-451-1993

CR2E037 (10/02)