

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 # **N94000003779**

1. Corporation Name

FLORIDA WILD MAMMAL ASSOCIATION, INC.

700001727547  
-02/29/96--01017--008  
\*\*\*61.25

Principal Place of Business

221 SW 6 Street  
Dania, Florida 33004

Mailing Address

221 SW 6 Street  
Dania, Florida 33004

3. Date Incorporated or Qualified

08/01/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 198 Edgar Poole Road

2a. Mailing Address

26 198 Edgar Poole Road

4. FEI Number

65-0508616

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

23 Crawfordville, Florida

City & State

28 Crawfordville, Fla.

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

Zip

Country

24 32327

25 Wakulla

Zip

Country

29 32327

30 Wakulla

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

9. Name and Address of Current Registered Agent

Bette Le strange  
Plaza 3000-3020 N. Federal Highway  
Building 11  
Ft. Lauderdale, Fla. 33305

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 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

*Bette Le strange*

(NOTE: Registered Agent signature required when reinstating)

DATE

*Jan 1, 1996*

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME: Beatty, Chris M  
STREET ADDRESS: 221 Southwest 6 Street  
CITY - ST - ZIP: Dania, Florida 33004

TITLE ☐ DELETE

NAME: Beatty, Michael  
STREET ADDRESS: 221 Southwest 6 Street  
CITY - ST - ZIP: Dania, Florida 33004

TITLE ☐ DELETE

NAME:   
STREET ADDRESS:   
CITY - ST - ZIP:

TITLE ☐ DELETE

NAME: Pasco, Georgia  
STREET ADDRESS: 1309 NW 129 Way  
CITY - ST - ZIP: Sunrise, Florida 33323

TITLE ☐ DELETE

NAME: Perugini, Carol  
STREET ADDRESS: 9124 Bedford Drive  
CITY - ST - ZIP: Boca Raton, Fla. 33434

TITLE ☐ DELETE

NAME: Barnhill, Bonni  
STREET ADDRESS: 11460 Shady Lane  
CITY - ST - ZIP: Plantation Acres, Fla. 33325

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE:   
12 NAME: Perugini, Carol  
13 STREET ADDRESS: 9124 Bedford Drive  
14 CITY - ST - ZIP: Boca Raton, Fla. 33434

21 TITLE: ☐ Change ☐ Addition

22 NAME: Beatty, Michael  
23 STREET ADDRESS: 198 Edgar Poole Road  
24 CITY - ST - ZIP: Crawfordville, Florida 32327

31 TITLE: ☐ Change ☐ Addition

32 NAME: ~~Lestrangle, Bette~~  
33 STREET ADDRESS: ~~160 N. Compass Drive~~  
34 CITY - ST - ZIP: ~~Ft. Lauderdale, Florida 33308~~

41 TITLE: ☐ Change ☐ Addition

42 NAME: Perugini, Carol  
43 STREET ADDRESS: 9124 Bedford Drive  
44 CITY - ST - ZIP: Boca Raton, Florida 33434

51 TITLE: ☐ Change ☐ Addition

52 NAME: Keil, Trice  
53 STREET ADDRESS: 616 S. 16 Street  
54 CITY - ST - ZIP: Herin, Illinois 62948

61 TITLE: ☐ Change ☐ Addition

62 NAME: Pasco, Georgia  
63 STREET ADDRESS: 1309 NW 129 Way  
64 CITY - ST - ZIP: Sunrise, Florida 33323

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:

*Carol Perugini*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 1, 1996 904926-8308

Date

Daytime Phone #

CR2037 (12/95)