

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003370

FILED
Jan 23, 2009
Secretary of State

Entity Name: EVERGLADES ASTRONOMICAL SOCIETY, INC.

Current Principal Place of Business:

755 8TH AVE S
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10406
NAPLES, FL 34101

New Mailing Address:

FEI Number: 59-3435308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

USHER, MICHAEL
COASTLAND CENTER MANAGEMENT OFFICE
1900 TAMiami TRAIL NORTH
NAPLES, FL 34102 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: PIPER, RICK
Address: 1460 21ST SW STREET
City-St-Zip: NAPLES, FL 34117

Title: DP () Delete
Name: PAUL, CHARLES
Address: 4421 BAY BEACH LN., #651
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D () Delete
Name: HENNELLS, SCOTT
Address: 2697 LONGBOAT DRIVE
City-St-Zip: NAPLES, FL 34104

Title: VPD () Delete
Name: STRACKBEIN, TODD
Address: 3471 1ST AVENUE NW
City-St-Zip: NAPLES, FL 34120

Title: SD () Delete
Name: USHER, MICHAEL
Address: 1689 NORTHGATE DRIVE
City-St-Zip: NAPLES, FL 34105

Title: TD () Delete
Name: MUNDELL, JEAN MARIE
Address: 3705 WEYMOUTH CIRCLE
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: GURNITZ, ROBERT N
Address: 1080 S. COLLIER BLVD., #24
City-St-Zip: MARCO ISLAND, FL 34145

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

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

Title: D (X) Change () Addition
Name: MUNDELL, JEAN MARIE
Address: 3705 WEYMOUTH CIRCLE
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT N. GURNITZ

DT

01/23/2009

Electronic Signature of Signing Officer or Director

Date