

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90087 045 ****61.25

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1. Entity Name

**SAFARI CLUB INTERNATIONAL CORP., PALM BEACH
CHAPTER**



Principal Place of Business

1501 NORTHPOINT PARKWAY
SUITE 100
WEST PALM BEACH FL 33407

Mailing Address

3208 N FLAGLER
1-C
WEST PALM BEACH FL 33407

2. Principal Place of Business

3208 N. FLAGLER DR

3. Mailing Address

Suite, Apt. #, etc.

City & State

W. PALM BEACH, FL

City & State

Zip

33407

Country

USA

Zip

Country

4. FEI Number

65-0608788

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BRUCE W. PARRISH, JR. PA
105 S. NARCISSUS AVE
7TH FLR- STE 412
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

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
Due By May 1, 2005**

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

TITLE PD
NAME HERSEY, HARRY W JR.
STREET ADDRESS 1501 NORTHPOINT PARKWAY
CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Delete

TITLE VD
NAME HERSEY, HARRY W III
STREET ADDRESS 1501 NORTHPOINT PARKWAY
CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Delete

TITLE STD
NAME GEORGE BANKS
STREET ADDRESS 13808 FAIRLANE COURT
CITY-ST-ZIP WEST PALM BEACH FL 33411 ☐ Delete

TITLE P
NAME HANLEY, JOYCE S
STREET ADDRESS 3208 N FLAGLER DR.
CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

JOYCE S. HANLEY President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**561
881-8323**