2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N9600000176 Jun 06, 2000 8:00 am 1. Entity Name **Secretary of State** THE LOWER PRIMATE CONSERVATION FOUNDATION, INC. 06-06-2000 90483 037 ****61.25 Principal Place of Business Mailing Address P O BOX 249 P Q BQX 249 MYAKKA CITY FL 34251-0249 MYAKKA CITY FL 34251 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3359549 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BODRY-SANDERS, PENELOPE** 3414 SOUTH FITCH AVENUE **INVERNESS FL 32652** Zip Code City FL this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. 8. The above named entire SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME BODRY-SANDERS, PENELOPE NAME STREET ADDRESS STREET ADDRESS 3414 SOUTH FITCH AVENUE CITY-ST-ZIP CITY-ST-ZIP **INVERNESS FL 32652** ☐ Change ☐ Addition ☐ Delete TITLE TITLE GOODE, MACKARNESS M NAME NAME STREET ADDRESS STREET ADDRESS 3414 SOUTH FITCH AVENUE CITY-ST-ZIP CITY-ST-7/P INVERNESS FL 32652 □_Delete Change - Addition TITLE TITLE GIVENS, SUSAN NAME NAME STREET ADDRESS STREET ADDRESS 1450 PALM AVE SW CITY-ST-ZIP CITY-ST-ZIP SEATTLE WA ☐ Change Addition TITLE ☐ Delete TITLE MCKENNA, MALCOLM NAME NAME STREET ADDRESS 117 S. WOODLAND ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD NJ 07631 ☐ Addition ☐ Change TITLE ☐ Delete **BROWN, BLAIR** MAME STREET ADDRESS STREET ADDRESS 434 W. 20 ST. # 3 CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10011** ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does pot-qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information we and accordate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director eved to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11

SIGNATURE: X / A STATE S

changed, or on an attachment

4/22/00

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STEPHEN P. TEITELBAUM

Certified Public Accountant

ONE WEST MAIN STREET SMITHTOWN, NEW YORK 11787

April 28, 2000

Florida Division of Unemployment Compensation 107 East Madison Street Tallahassee, Florida 32339-0212

> Re: The Lower Primate Conservation Foundation, Inc. P.O. Box 249 Myakka City, Florida 34251-0249 Federal ID# 59-3359549

We'are the accountants for the above named Corporation, an exempt organization under section 501 (c) (3) of the Internal Revenue Code.

It has come to our attention that we are not liable for Florida State Unemployment Compensation taxes.

We filed an initial return with the Florida Division of Unemployment Compensation for the 4th Quarter of 1999, period ending December 31, 1999, (copy enclosed). At this time a payment of \$ 121.50 was made to the Florida U.C. Fund.

We are requesting that you kindly issue us a refund of the \$121.50 and note your records accordingly that we are not liable for these payments.

If we can be of any further help please do not hesitate to contact us. Thank you for your assistance.

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Very truly yours.

Stephen P. Teitelbaum

Certified Public Accountant

cc: Penelope Bodry-Sanders (1994) 1994