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Apr 18 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000005943 (3)**

1. Corporation Name

**ENDANGERED PARROT TRUST INCORPORATED**

Principal Place of Business

**8675 S.W. 52ND STREET  
OCALA FL 34481**

Mailing Address

**8675 S.W. 52ND STREET  
OCALA FL 34481-5404**

3. Date Incorporated or Qualified  
**11/21/1996**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

**31-1513491**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MARSHALL, ALAN S ESQ.  
7617 LITTLE ROAD  
NEW PORT RICHEY FL 34654**

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 *Alan S. Marshall*  
Signature, typed or printed name of registered agent and title if applicable

**ALAN S. MARSHALL, ESQ**  
(NOTE: Registered Agent signature required when reinstating)

**4/10/97**  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE  
NAME **DEMPSEY, GARY**  
STREET ADDRESS **346 HENRY STREET**  
CITY-ST-ZIP **SOUTH ANBOY NJ 08879**

1.1 TITLE **D** ☒ Change ☒ Addition  
1.2 NAME **Frank Calabria**  
1.3 STREET ADDRESS **8675 S.W. 52ND Street**  
1.4 CITY-ST-ZIP **Ocala, Florida 34481**

TITLE **PD** ☐ DELETE  
NAME **FOSBINDER, KAY M**  
STREET ADDRESS **630 N. GARDEN CITY ROAD**  
CITY-ST-ZIP **FREEMONT NV 88025**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE  
NAME **GITT, JUDY**  
STREET ADDRESS **630 N. GARDEN CITY ROAD**  
CITY-ST-ZIP **FREEMONT NV 88025**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **MARSHALL, ALAN S**  
STREET ADDRESS **7617 LITTLE ROAD**  
CITY-ST-ZIP **NEW PORT RICHEY FL 34654**

4.1 TITLE **SD** ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **TD** ☐ DELETE  
NAME **BROEHM, KEVIN J**  
STREET ADDRESS **8675 S.W. 52ND STREET**  
CITY-ST-ZIP **OCALA FL 34481**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE **S** ☒ DELETE  
NAME **SMALDONE, LEONARD R**  
STREET ADDRESS **49 WHIPPANY ROAD**  
CITY-ST-ZIP **WHIPPANY NJ**

6.1 TITLE **SD** ☒ Change ☒ Addition  
6.2 NAME **Deborah Tisdale**  
6.3 STREET ADDRESS **605 East 3 Notch**  
6.4 CITY-ST-ZIP **Andalusia, Alabama 36420**

14. I do 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 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: *Alan S. Marshall*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**ALAN S. MARSHALL**  
Date **4/10/97** Daytime Phone # **913 848-9488**

CR2E037 (9/96)