SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

### DOCUMENT # N97000002091

### DISCOVER FLORIDA NATURE AND HERITAGE ASSOCIATION , INC.

Principal Place of Business 701 BRICKELL AVENUE **SUITE 3000** MIAMI FL 33131

2. Principal Place of Business

21

Mailing Address

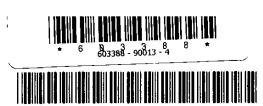
2a. Mailing Address

26

701 BRICKELL AVENUE SUITE 3000 MIAMI FL 33131

## **FILED** Aug 10, 1999 8:00 am § Secretary of State

08-10-1999 90013 004 \*\*\*\*61.25



3. Date Incorporated or Qualifed

01/15/1997

Suite, Apt. #	#, etc. * -	Suite, Apt. #, etc.			4. FEI Number	2011	<del> </del>	olied For
22		27			65-0936°	134	Not	Applicable
¬ ···, ·· · · · · · · · · · · · · · · ·		City & State	Sity & State		5. Certificate of Status Des	ired 🗌	<b>\$8.75</b> A Fee Red	
Zip	Country Zip		Country		6. Election Campaign Fina	ncina	\$5.00	May Re
24	25 29 30		1		Trust Fund Contribution	- 11	Added to	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
	J. Haire and Address of Current	tegistorea Agent	81	Name				
INTRASTATE REGISTERED AGENT CORPORATION					····			
				82 Street Address (P.O. Box Number is Not Acceptable)				
701 BRICKELL AVENUE								
SUITE 3000								
MIAMI FL 33131				City		FL	85 Zip C	ode
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  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
	Signature, typed or printed name of registered agent a OFFICERS AND		13.	i signature requir	ADDITIONS/CHANGES		ID DIRECTO	RS IN 12
12.		DELETE	1.1 TITLE		ABBITIONO, CITATO ES	10 011 10007	Change	Addition
	DP		1.2 NAME					_
NAME	HERTZ, ARTHUR H							
STREET ADDRESS	3195 PONCE DE LEON BLVD		1.3 STREET					
CITY-ST-ZIP	CORAL GABLES FL 33134		1.4 CITY-ST	-ZIP			Change	Addition
TITLE	D	☐ DELETE	2.1 TITLE				Onlarige	
NAME	HERTZ, ANDREW P		2.2 NAME					1
STREET ADDRESS	3195 PONCE DE LEON BLVD		2.3 STREET					Í
CITY-ST-ZIP -	CORAL GABLES FL 33134		2. 4 CITY-S	T-ZIP		·		Addition
TITLE	D •	DELETE	3.1 TITLE				Change	☐ Addition
NAME	GOLLING, C WENDELL & C.WENDALL COLLINS							}
STREET ADDRESS	3195 PONCE DE LEON BLVD		3.3 STREET	ADDRESS				]
Crty-St-ZIP	CORAL GABLES FL 33134		3.4. CITY-S	r-zip				
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4, 2 NAME					
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP			4.4 CITY-ST	-ZIP			C7 01	Addition
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP			5.4 CITY-ST	-ZIP	-+			<b>□ 4</b> ,1397
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	-ZIP				

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 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 of 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 the address with all other like empowered.

SIGNATURE:

KÉ REQUIRED

305-5141403

# CONSENT IN LIEU OF AN ANNUAL MEETING OF THE BOARD OF DIRECTORS OF

### DISCOVER FLORIDA NATURE AND HERITAGE ASSOCIATION, INC.

The undersigned, being all of the members of the Board of Directors of DISCOVER FLORIDA NATURE AND HERITAGE ASSOCIATION, INC., a Florida not for profit corporation (the "Corporation"), waive all requirements of notice and consent to the adoption of the following resolutions without a meeting, pursuant to the bylaws and Sections 617.0701 and 617.0823 of the Laws of the State of Florida:

WHEREAS, this consent is in lieu of an annual meeting of the Board of Directors.

RESOLVED, that all lawful actions of the Officers of the Corporation, in the course of their conduct on behalf of the Corporation since the previous annual meeting or consent in lieu thereof are hereby approved and confirmed.

RESOLVED, that the following persons have served as Officers of the Corporation and shall continue to serve until the next annual meeting as provided in the bylaws or until their earlier death, resignation or removal from office:

Arthur H. Hertz

President

RESOLVED, that the executed copy of this consent shall be placed with the minutes of proceedings of the Directors.

IN WITNESS WHEREOF, the undersigned Directors have caused this consent to be executed this 20 day of 900, 1999.

DIRECTORS:

Arthur H. Hertz

And WYD Herr

C. Wendell . Collins