

19800003851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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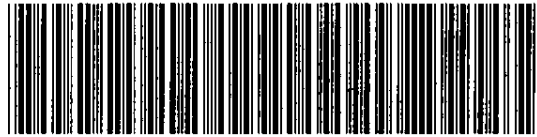
(Business Entity Name)

(Document Number)

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2010 JAN -4 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend  
SO

1-710

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Friends of Nature Wildlife Refuge

**DOCUMENT NUMBER:** N98000003851

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Geiler VMD  
(Name of Contact Person)

Eastside Veterinary Hospital  
(Firm/ Company)

731 A East Highway 50  
(Address)

Clermont Florida 34711  
(City/ State and Zip Code)

eastsidevet@mindspring.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Geiler VMD at ( 352 ) 394-6624  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Friends of Nature Wildlife Refuge, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

N98 00000 3851

(Document Number of Corporation (if known))

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TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

Eastside Veterinary Hospital Inc  
731A East Highway 50  
Clermont; FL 34711

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

731A East Highway 50  
Clermont FL 34711

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

William Geiler VMD

731A East Highway 50

New Registered Office Address:

(Florida street address)

Clermont

(City)

Florida 34711  
(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

William Geiler

Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**  
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>President</u>	<u>William Geiler VMD</u>	<u>Eastside Veterinary Hospital</u> <u>731A. East Hwy 50</u> <u>Clermont FL 34711</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>PD</u>	<u>Constance Ferguson</u>	<u>23300 CR 561</u> <u>Astataula FL 34705</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>ID</u>	<u>Roger Ferguson</u>	<u>23300 CR 561</u> <u>Astataula</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

- Nancee Jackson 3550 Sarasota Golf Club Blvd  
Sarasota FL 34240 ☒ Remove

- Brandon J Ferguson 23300 CRS 61 Astroturf FL ☒ Remove

The date of each amendment(s) adoption: \_\_\_\_\_

12 30-09  
(date of adoption is required)

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated Dec 30, 2009

Signature William Geiler VMD

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

William Geiler  
(Typed or printed name of person signing)

President  
(Title of person signing)