

2001 UNIFORM BUSINESS REPORT (UBR)

80 75

DOCUMENT # **N98000006684**

1. Entity Name
FLORIDA KEYS BIRDING AND WILDLIFE FESTIVAL, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 29 PM 2:53

Principal Place of Business
**NATIONAL RAFLUGA
BIG PINE KEY PLAZA
BIG PINE KEY FL 33043**

Mailing Address
**NATIONAL RAFLUGA
BIG PINE KEY PLAZA
BIG PINE KEY FL 33043**



2. Principal Place of Business
National Key Deer Refuge

Suite, Apt. #, etc.
Big Pine Key Plaza

City & State
Big Pine Key FL

Zip
33043

Country
USA

3. Mailing Address
P.O. Box 431411

Suite, Apt. #, etc.

City & State
Big Pine Key FL

Zip
33043-1411

Country
USA

REINSTATEMENT DO NOT WRITE IN THIS SPACE **01**

4. FEI Number **65-1017962**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BELL, JAMES W
30233 PINE WAY
BIG PINE KEY FL 33043**

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.

SIGNATURE James W. Bell (NOTE: Registered Agent signature required when reinstating)
DATE July 10, 2001

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TATGANHORST, JOY 5550 OVERSEAS HWY MARATHON FL 33043 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairperson James W. Bell 30233 Pine Way Big Pine Key, FL 33043 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WEINSTEIN, TASHA 104 ATLANTIC AVENUE ISLAMORADA FL 33034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC, D Casey Lott 115 Indian Mound Trail Plantation Key FL 33070 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROCHE, BEN 1432 HARBOR DR MARATHON FL 33050 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Robert Guerra 2796 Old Hwy, Suite 213C Marathon FL 33050 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Joy Tatgenhorst 5550 Overseas Hwy Marathon, FL 33050 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800004698018--3 -11/29/01--01040--005 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	****236.25 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: James W. Bell **SIGNATURE REQUIRED** July 10, 2001 305-872-0774

CR2E037 (5/01)