2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N99000001477 02-06-2007 90013 005 ****61.25 APALACHICOLA BAY AND RIVER KEEPER, INC. Mailing Address Principal Place of Business 23 AVENUE D 23 AVENUE D APALACHICOLA, FL 32320 APALACHICOLA, FL 32320 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222007 Chg-NP CR2E037 (12/06) Applied For City & State 4. FEI Number 59-3550426 City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TONSMEIRE, DANIEL L ... Street Address (P.O. Box Number is Not Acceptable) 23 AVENUE D APALACHICOLA, FL 32320 City Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed risme of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State - Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D/P TELL ☐ Delete TITLE TAULOR TAYOLR, CHAD NAME NAME 4226 BUCKLAND TRAIL STREET ADDRESS **4226 BUCKLAND TRAIL** STREET ADDRESS REENWOOD, FL 32443 CITY-ST-709 GREENWOOD, FL 32443 CITY-ST-ZIP DNP TITLE RICHARD BICKEL TELE ☐ Delete Addition Addition FARR, GRAYAL NAME NAME 96 UIL ST STREET ADDRESS 3315 READING LANE STREET ADDRESS APALACHICULA FL CITY-ST-ZIP TALLAHASSEE, FL 32312 CITY-ST-ZIP TITLE TITLE Addition ☐ Delete FIRM LYCETT ☐ Change NAME MORAN, CHRIS NAME 1918 VINELAND LANE STREET ADORESS STREET ADDRESS CARRABBLE FL CITY-ST-ZIP TALLAHASSEE, FL 32311 CITY-ST-ZIP TITLE D/S ☐ Delete TITLE ☐ Change Addition JOHN MIDDLEMAS POVE RD NAME MILLER, NANCY C NAME STREET ADDRESS P.O. BOX 16278 STREET ADDRESS PANAMA CITY, FC CITY-ST-ZIP TALLAHASSEE, FL 32317 32401 CITY-ST-7tP TITLE ☐ Delete TITLE THOMAS ADAMS Change ☐ Addition NAME THOMAS, ADAMS NAME 1440 RM CT STREET ADDRESS 1440 ELM COURT STREET ADDRESS ST. GEURGE ISLAND, FL 32328 CITY-ST-7IP ST. GEORGE ISLAND, FL 32328 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition IARI MURRY ASHLEY, DON NAME _ NAME 1424 ELM CT STREET ADDRESS P.O. BOX 430 STREET ADDRESS CITY-ST-71P SOPCHOPPY, FL 32358 ST. GEORGE ISLAMD FC CITY - ST - ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

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SIGNATURE:

FILED

Feb 06, 2007 8:00 am

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

DOCU 1. Entity Nam APALACI			ATTACHMENT						
23 AVENUE APALACHICO	LA, FL 32320		3 AVENUE D Palachicola, Fl 32320		60013563				
<u>-</u> :	flace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			j-NP	CR2E037	· , ,		
City & State		City & State	City & State		4. FEI Number 59-3550426	·		→	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of Stat	us Desired		8.75 Add ee Require	
	6. Name and Address of Current Re	gistered Agent			7. Name and Addre	ss of New Rec	gistered Ag	ent	
TONSMEI	RE, DANIEL L		Name	e					
23 AVENUE D APALACHICOLA, FL 32320				Street Address (P.O. Box Number is Not Acceptable)					
			City				FL.	Zip Code	e
8. The above	named entity submits this statement for t	he purpose of changing its	registered office	e or register	ed agent, or both, in th	e State of Flori		miliar with	and accept
the obligat	tions of registered agent.	, , , , , , , , , , , , , , , , , , , ,							
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Filing Fee is \$61.25 9. Election Campa									
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