

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 05, 2007 8:00 am**  
**Secretary of State**

02-05-2007 90084 026 \*\*\*\*61.25

**DOCUMENT # N99000002969**

1. Entity Name  
**FRIENDS OF ANNE KOLB NATURE CENTER, INC.**



Principal Place of Business  
**751 SHERIDAN STREET  
HOLLYWOOD, FL 33019**

Mailing Address  
**751 SHERIDAN STREET  
HOLLYWOOD, FL 33019**

**40009601**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02012007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**CASE, SARA  
751 SHERIDAN STREET  
HOLLYWOOD, FL 33019**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **EMERY, RUSSELL**  
STREET ADDRESS **301 CAMBRIDGE RD, # 302**  
CITY-ST-ZIP **HOLLYWOOD, FL 33324**

TITLE **VP** ☐ Delete  
NAME **TAYLOR, KAY**  
STREET ADDRESS **3110 SW 196 LANE**  
CITY-ST-ZIP **FORT LAUDERDALE, FL 33332**

TITLE **D** ☐ Delete  
NAME **COUTURE, CONNIE**  
STREET ADDRESS **614 TRAFALGAR COURT**  
CITY-ST-ZIP **DANIA, FL 33004**

TITLE **T** ☐ Delete  
NAME **PIERETTE, BETTEY**  
STREET ADDRESS **303 E 4TH STREET**  
CITY-ST-ZIP **DANIA BEACH, FL 33004**

TITLE **D** ☐ Delete  
NAME **LEWIS, JOHN**  
STREET ADDRESS **235 SW 7TH STREET**  
CITY-ST-ZIP **DANIA BEACH, FL 33004**

TITLE **D** ☐ Delete  
NAME **BLAKE, SUZANNE**  
STREET ADDRESS **1245 VANBUREN STREET**  
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VP** ☒ Change ☐ Addition  
NAME **Blake Suzanne**  
STREET ADDRESS **1245 Van Buren St.**  
CITY-ST-ZIP **Hollywood FL 33020**

TITLE **Secretary** ☒ Change ☐ Addition  
NAME **Taylor Kay**  
STREET ADDRESS **3110 Sw 196 Lane**  
CITY-ST-ZIP **Ft Lauderdale FL 33332**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Russell Emery President**

**2-1-07**

**954 989 2617**

Date

Daytime Phone #