2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000004820

1. Entity Name
HERNANDO EXOTIC BIRD CLUB, INC.

Principal Place of Business	Mailing Address
14415 DABNEY COURT SPRING HILL, FL 34610	14415 DABNEY COURT SPRING HILL, FL 34610

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04112006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3514751
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KLINK, SALLIE
14415 DABNEY COURT
SPRING HILL, FL 34610

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TUOMI, MONA
STREET ADDRESS	17016 BOSLEY DRIVE
CITY-ST-ZIP	BROOKSVILLE, FL 34610
TITLE	D
NAME	FOWLER, MARY
STREET ADDRESS	8211 CRESAP STREET
CITY-ST-ZIP	BROOKSVILLE, VL 34613
TITLE	D
NAME	FEIERABEND, KEITH
STREET ADDRESS	15427 DENNIS DRIVE
CITY-ST-ZIP	HUDSON, FL 34669
TITLE	P
NAME	KLINK, SALLIE
STREET ADDRESS	14415 DABNEY COURT
CITY-ST-ZIP	SPRING HILL, FL 34601
TITLE	VP
NAME	ARNSTEIN, PAUL
STREET ADDRESS	15129 GARSON LOOP
CITY-ST-ZIP	SPRING HILL, FL 34610
TITLE	S
NAME	PACNIELLO, CARLA
STREET ADDRESS	8139 WINTER STREET
CITY-ST-ZIP	BROOKSVILLE, FL 34613

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04/26/06-80105-025 61.25

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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 Diane Hagert Treasurer 4-11-06 (352) 796-6627
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #