2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P24362

1. Entity Name
FRIENDS OF CONSERVATION - FRIENDS OF THE MASAI MARA, INCORPORATED

Principal Place of Business	Mailing Address
1520 KENSINGTON, STE 212 OAK BROOK, IL 60523	1520 KENSINGTON, STE 212 OAK BROOK, IL 60523

DO NOT WRITE IN THIS SPACE

04122006 No Chg-NP CR2E037 (11/05)

4. FEI Number
36-3561971

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

COOKE, NORMA L.
9301 NORTH AIA SUITE 201
VERO BEACH, FL 32963

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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	PD
NAME	KENT, JORIE BUTLER
STREET ADDRESS	1520 KENSINGTON, #212
CITY-ST-ZIP	OAK BROOK, IL 60523
TITLE	TVD
NAME	KENT, GEOFFREY J.W.
STREET ADDRESS	1520 KENSINGTON, #212
CITY-ST-ZIP	OAK BROOK, IL 60523
TITLE	PSD
NAME	BUTLER, REUTE
STREET ADDRESS	1520 KENSINGTON, #212
CITY-ST-ZIP	OAK BROOK, IL 60523
TITLE	AS
NAME	COOKE, NORMA L.
STREET ADDRESS	1520 KENSINGTON, #212
CITY-ST-ZIP	OAK BROOK, IL 60523
TITLE	VP
NAME	WEBLEY, JOHN
STREET ADDRESS	1520 KENSINGTON, #212
CITY-ST-ZIP	OAK BROOK, IL 60523
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/04/06-80018-018 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: Norma L. Cooke NORMA L COOKE 04-13-2006 630 954 3388
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #