

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90149 009 ****61.25

DOCUMENT # P24362



1. Entity Name
**FRIENDS OF CONSERVATION - FRIENDS OF THE MASAI M
ARA, INCORPORATED**

Principal Place of Business

1520 KENSINGTON. STE 201
OAK BROOK IL 60521

Mailing Address

1520 KENSINGTON. STE 201
OAK BROOK IL 60521

40022042



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

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 1
VERO BEACH FL 32963

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

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	PD	<input type="checkbox"/> Delete
NAME	KENT, JORIE BUTLER	
STREET ADDRESS	1520 KENSINGTON, #201	
CITY-ST-ZIP	OAK BROOK IL	
TITLE	TVD	<input type="checkbox"/> Delete
NAME	KENT, GEOFFREY J.W.	
STREET ADDRESS	1520 KENSINGTON, #201	
CITY-ST-ZIP	OAK BROOK IL	
TITLE	PSD	<input type="checkbox"/> Delete
NAME	BUTLER, REUTE	
STREET ADDRESS	1520 KENSINGTON, #201	
CITY-ST-ZIP	OAK BROOK IL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	COOKE, NORMA L.	
STREET ADDRESS	1520 KENSINGTON, #201	
CITY-ST-ZIP	OAK BROOK IL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WEBLEY, JOHN	
STREET ADDRESS	1520 KENSINGTON, #201	
CITY-ST-ZIP	OAK BROOK IL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *SIGNATURE OF Norma L. Cooke* **NORMA L. COOKE** 1/27/03 630-954-3388

CR2E037 (10/02)