2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #725645



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NAME STREET ADDRESS CITY-ST-ZIP TITLE CHANDLER, PATTI STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE CHANDLER, PATTI STREET ADDRESS CITY-ST-ZIP TITLE D Delete TITLE D Change Addition Change	4560 NORTH U.S. HIGHWAY 1 MEIBOURNE, FL 32935 Suito, Apt. #, etc. Suito, Apt. #, etc. Suito, Apt. #, etc. Cay & State Country Zp Country Sp	FLORIDA	A WILDLIFE HOSPITAL & S	ANCTUARY INC.							
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ZP Country Zp Country S. Certificate of Status Desired R \$8.75 Additional Fee Required 6. Name and Address of Currant Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent CASTMER-GARY A - 3039 SWEET PINE DR MELBOURNE, FL 32935 City FL Zip Code 6. The above named entity submits this statement for the purpose of changing at registered agent, or both, in the State of Florida. Tarn familiar with, and accept the coblegation of president agent and tire 1 special president agent agent agent agent agent agent agent agen	Zip Country	Suite, Apt. #, etc.		Suite, Apt. #, etc.			02012007 Ct	ng-NP	CR2E0:	37 (12/06)	
8. Kerne and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 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 sum familiar with, and accept the obligations of registered agent. SIGNATURE 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 sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I sum familiar with, and accept th	S. Centracte of Statutu Desarce S. Centracte of New Registered Agent S. Centracte S. Centracte of New Registered Agent S. Centracte	City & Stat		<u></u>			4. FEI Number 23-729282	6			
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Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered affect or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligation of Fiorida. I am familiar with, and accept the obligation of Fiorida. I am familiar with, and	STREET ADDRESS AND DIRECTORS IN ILL THE MD OFFICERS AND DIRECTORS IN		6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New R	egistered .	Agent	
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CITY-ST-ZIP MELBOURNE, FL 32934	CITY-ST-ZIP MELBOURNE, FL 32934 CITY-ST-ZIP TITLE	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DII TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD	Trust Fund Co	ONTRIBUTION. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LIN 50	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	tment of S RECTORS IN Change Change	tate ₹ 10 ▼ Addition
NAME FRESA, HEATHER STREET ADDRESS 1892 SANBAR DR STREET ADDRESS CITY-ST-ZIP MERRITT ISLAND, FL 32953 CITY-ST-ZIP TITLE VD Delete TITLE CHANDLER, PATTI STREET ADDRESS STREET ADDRESS STREET ADDRESS ADDRESS CITY-ST-ZIP CITY-ST-ZIP MELBOURNE, FL 32935 CITY-ST-ZIP TITLE D D Delete TITLE MAME Change Addition NAME CITY-ST-ZIP TITLE D Change Addition Addition Change Addition NAME	NAME STREET ADDRESS CITY-ST-ZIP TITLE VD CHANDLER, PATTI STREET ADDRESS CITY-ST-ZIP TITLE OLEJARSKI, EILEEN NAME STREET ADDRESS CITY-ST-ZIP TITLE D OLEJARSKI, EILEEN STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA	Trust Fund Co	ONTRIBUTION. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LIH 50 ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	tment of S RECTORS IN Change Change	tate ₹ 10 ▼ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE D Delete	NAME STREET ADDRESS CITY-ST-7IP MERRITT ISLAND, FL 32953 TITLE VD CHANDLER, PATTI STREET ADDRESS CITY-ST-7IP TITLE CHANDLER, PATTI STREET ADDRESS CITY-ST-7IP TITLE D D Delete TITLE D Delete TITLE D Delete TITLE D Delete TITLE STREET ADDRESS CITY-ST-7IP TITLE D DELET STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR	Trust Fund Co	ONTRIBUTION. 11. 11. 11. 11. 11. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D LIH 50 ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	tment of S RECTORS IN Change Change	tate ₹ 10 ▼ Addition
CITY-ST-ZIP MERRITT ISLAND, FL 32953	CITY-ST-ZIP TITLE VD CHANDLER, PATTI STREET ADDRESS CITY-ST-ZIP TITLE D Delete TITLE STREET ADDRESS TREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DII TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934	Trust Fund Ca	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIH 50 ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition
TITLE	TITLE CHANDLER, PATTI NAME STREET ADDRESS CITY-ST-ZIP TITLE D Delete TITLE D Delete TITLE OLEJARSKI, EILEEN STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER	Trust Fund Ca	ONTRIBUTION. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LIH 50 ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition
NAME	NAME STREET ADDRESS CITY-SI-7/P MELBOURNE, FL 32935 TITLE D Delete TITLE OLEJARSKI, EILEEN STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR	Trust Fund Ca	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition
STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32935 TITLE D Delete TITLE OLEJARSKI, EILEEN NAME	STREET ADDRESS CITY-ST-ZP MELBOURNE, FL 32935 TITLE D Delete TITLE OLEJARSKI, EILEEN STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE CONTACT TO THE TITLE NAME STREET ADORESS CITY-ST-ZIP	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953	Trust Fund Ca	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition
CITY-ST-2IP MELBOURNE, FL 32935 CITY-ST-2IP TITLE D Delete TITLE Change Addition NAME OLEJARSKI, EILEEN NAME OLEJARSKI, EILEEN NAME	CITY-ST-ZIP MELBOURNE, FL 32935 CITY-ST-ZIP ITILE D Delete TITLE	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953 VD	Trust Fund Ca	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition Addition
NAME OLEJARSKI, EILEEN NAME	NAME OLEJARSKI, EILEEN NAME STREET ADDRESS 262 MARION ST. STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953 VD CHANDLER, PATTI	Trust Fund Ca	Ontribution. 11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition Addition
NAME OLEJARSKI, EILEEN NAME	NAME OLEJARSKI, EILEEN NAME STREET ADDRESS 262 MARION ST. STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953 VD CHANDLER, PATTI 3496 SPARROW CT.	Trust Fund Ca	Ontribution. 11. III.E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition Addition
CTOTT ADDRESS 262 MADION OT		TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953 VD CHANDLER, PATTI 3496 SPARROW CT. MELBOURNE, FL 32935	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition Addition Addition
	CITY-ST-ZIP INDIAN HARBOR BEACH, FL 32937	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIE OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953 VD CHANDLER, PATTI 3496 SPARROW CT, MELBOURNE, FL 32935 D	Trust Fund Co	Ontribution. 11. III.E NAME STREET ADDRESS CITY-ST-ZIP TITLE	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition Addition Addition
	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	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE TD CASTNER, GARY A 3039 SWEET PINE DR MELBOURNE, FL 32935 MD SMALL, SUE 414 THRUSH DR SATELLITE BCH, FL 32937 PD MEDERER, HYTA 3980 TURKEY POINT DR MELBOURNE, FL 32934 SD FRESA, HEATHER 1892 SANBAR DR MERRITT ISLAND, FL 32953 VD CHANDLER, PATTI 3496 SPARROW CT. MELBOURNE, FL 32935 D OLEJARSKI, EILEEN 262 MARION ST.	Trust Fund Co	Ontribution. 11. III.E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	O LIN SC ME	Added to Fees ADDITIONS/CHANGE OA ARCHE	Flor ES TO OFFICE R LANE	ida Depar RS AND DII	thent of S RECTORS IN Change Change Change	Addition Addition Addition

indicated on this report of supplierental 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: