

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Janet B. Mather
Secretary of State
Tallahassee, Florida 32303

DOCUMENT # **741417** (0)
ST. FRANCIS OF ASSISI WILDLIFE ASSOCIATION, INCORPORATED

APPROVED AND FILED
MAY 11 1996
CLERK OF THE STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: **1459 GRAPE ST TALLAHASSEE FL 32303 US**
Mailing Address: **P.O. BOX 20248 TALLAHASSEE FL 32316**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/23/1978** 3a. Date of Last Report: **05/01/1994**

4. FEI Number: **59-1888022** Applied For: Not Applicable:

2. Principal Place of Business: **1940 N. Monroe** 28. Mailing Address: **P.O. Box 38160**

21. Suite Apt. # etc: 26. Suite, Apt. #, etc:

22. City & State: **Tallahassee, FL** 27. City & State: **Tallahassee, FL**

23. Zip: **32303** 29. Zip: **32315** 30. Country:

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

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **SHAW, JEFFREY CRAIG 1459 GRAPE ST TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent:

81. Name: **Kathy E. Salandi**

82. Street Address (P.O. Box Number is Not Acceptable): **5849 Rustic Dr.**

83.

84. City: **Tallahassee** FL 85. Zip Code: **32303**

11. Pursuant to the provisions of Sections 607.0502 and 607.150A, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0503, Florida Statutes.

SIGNATURE: *Jeffrey E. Shaw* *Kathy E. Salandi* **4-28-95**

12. OFFICERS AND DIRECTORS

TITLE: DST	NAME: SHAW, J CRAIG J.D.
STREET ADDRESS: 1459 GRAPE ST	CITY, ST, ZIP: TALLAHASSEE FL
TITLE: DP	NAME: SHAW, MARY JANE
STREET ADDRESS: 529 EAST JENNINGS ST	CITY, ST, ZIP: TALLAHASSEE FL
TITLE: D	NAME: HILL, LOUIS JR.
STREET ADDRESS: 5926 MILLER LANDING RD	CITY, ST, ZIP: NAPLES FL
TITLE: D	NAME: MCCORD, GUYTE P. 111
STREET ADDRESS: 503 VINNEDGE RDE	CITY, ST, ZIP: TALLAHASSEE FL
TITLE: D	NAME: GSTEIGER, YVONNE
STREET ADDRESS: 1923 CHOWKEEBIN NENE	CITY, ST, ZIP: CHARLOTTE, NC.
TITLE: PS	NAME: SALANDI, KATHY
STREET ADDRESS: 5849 RUSTIC DR	CITY, ST, ZIP: AUBURN AL

13. ADDITIONS, CHANGES TO OFFICERS, AND NEW CORPORATE

11 TITLE: JoAnn Fletcher DST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME: 5394 Appledore Lane	
13 STREET ADDRESS: Tallahassee, FL 32308	
14 CITY, ST, ZIP: 	
21 TITLE: Doug Grills D/P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME: 3770 Suffolk Drive	
23 STREET ADDRESS: Tallahassee, FL 32308	
24 CITY, ST, ZIP: 	
31 TITLE: 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME: Tallahassee, FL 32312	
33 STREET ADDRESS: 	
34 CITY, ST, ZIP: 	
41 TITLE: 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME: Jerry Deloney	
43 STREET ADDRESS: 1881 N. MLK Blvd.	
44 CITY, ST, ZIP: Tallahassee, FL 32303	
45 CITY, ST, ZIP: 	
51 TITLE: D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME: D/T	
53 STREET ADDRESS: Tallahassee, FL 32303	
54 CITY, ST, ZIP: 	
61 TITLE: 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME: Tallahassee, FL 32303	
63 STREET ADDRESS: 	
64 CITY, ST, ZIP: 	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. Further, I certify that the information related on this annual report or supplemental annual 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 appointed to operate this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes or new attachments with an address.

SIGNATURE: *Jeffrey E. Shaw* *Kathy E. Salandi* **4-28-95** **204-4070**



APR-29-1995 09:51 FROM

TO

92244873

P.01/01

741417

**St. Francis of Assisi Wildlife Association, Inc.
Board of Directors**

Louis Hill - Director
5926 Miller Landing Road
Tallahassee, FL 32312

Guyte P. McCord, III - Director
503 Vinnedge Ride
Tallahassee, FL 32303

JoAnn Fletcher - Director / Secretary
5394 Appledore Lane
Tallahassee, FL 32308

Kathy Salandi - Director / Treasurer
5649 Rustic Drive
Tallahassee, FL 32303

Jerry DeLoney - Director
1881 N. Martin L. King Blvd.
Tallahassee, FL 32303

Doug Gillis - Director / President
3770 Suffolk Drive
Tallahassee, FL 32308

Diane McCain - Director
Florida Dept. Of Education
PL-08 Capitol Bldg.
Tallahassee, FL 32399