## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 74

Principal Place of Business

741417

(0)

Mailing Address

## ST. FRANCIS OF ASSIS! WILDLIFE ASSOCIATION, INCO

TALLAHASSEE FL 32303

appears in Block 12 or Block 13 if

SIGNATURE:

Suite, Apt #, etc.  Suite, Apt #, etc.  Suite, Apt #, etc.  5, Certificate of Status Desired Fee Required  City & State  City &	1940 N MONROE TALLAHASSEE F US		P O BOX 38160 TALLAHASSEE FL 32315-8160 US			Date Incorporated or Qualified	3a. Dai	e of Las	t Report	
Suito, Api if etc										
City & State   27							EQ-1000000			
22   Zip   Country   Zip   Country   8. The corporation has ballinly for intergible tax uncles is 199 030.2, florida Statutes   Yee   No   Yee   No   No   No   No   No   No   No	Suite, Apt	#, etc.				5. Certificate of Status Desired	Ø	P1		
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name  12. Name  13. Name  13. Name  14. Name  15. Name  15. Name  15. Name  16. Name and Address of New Registered Agent  16. Name  17. Name  18. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  19. Street Address (P.O. Box Number is Not Acceptable)  10. Street Ad	City & State	)	<u>├</u> ─┐ ′							
LINDSEY, KATHY E  \$49 RUSTIC DR  TALLAHASSEE FL 32303  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sockions 617,0502 and 617,1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Florida. Such change was submit order by the corporation's board of directors. I heraby accept the apportment as registered agent in an familiar willt, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SID FIGURES AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE  SID DIRECTORS IN 12  THE  SID DIRECTORS IN 12  THE  SID DIRECTORS IN 12  TALLAHASSEE FL 32308  1 STREET ADDRESS  3770 SUFFOLK DRIVE  23 SIRRET ADDRESS  CITY, 51-79  TALLAHASSEE FL 32308  1 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TALLAHASSEE FL 32308  1 STREET ADDRESS  3770 SUFFOLK DRIVE  23 SIRRET ADDRESS  CITY, 51-79  TALLAHASSEE FL 32308  1 STREET ADDRESS  3770 SUFFOLK DRIVE  23 SIRRET ADDRESS  3770 SUFFOLK DRIVE  31 TITLE  Change Addition  MAME  MCCORD, QUYTE P. 111  502 DELETE  41 TITLE  Change Addition  MCCORD, QUYTE P. 111  503 VINNEDGE RIDE  TALLAHASSEE FL 32303  TALL	Ζίρ <b>24</b>	25 29 30			Florida Statutes					
LINOSEY, KATHY E 5649 RUSTIC DR TALLAHASSEE FL 32303  87 Street Address (P.O. Box Number is Not Acceptable)  88 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 from familier with, and accept the obligations of, Section 617,0502 and 617,1508, Florida Statutes.  SIGNATURE.  SIGNATURE		9. Name and Address of Currer	nt Registered Agent		<u>. T</u>		10. Name and Address of New Re	gistered A	gent	
Se49 RUSTIC DR TALLAHASSEE FL 32303  84 City FL 85 Zip Code  11. Pursuant to the provisions of Socilions 517 0502 and 617-1508, Florids 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 Florids Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florids Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 617,0503, Florids Statutes.  SIGNAT URE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TRIE SD. DELETE 111 TILE  12 NAME  FLETCHER, JOANN 12 NAME  SS94 APPLEONRE LANE  TALLAHASSEE FL 32308 14 CITY-ST-ZP  TALLAHASSEE FL 32308 14 CITY-ST-ZP  TALLAHASSEE FL 32308 2 NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  TALLAHASSEE FL 32308 2 NAME  D D DELETE 111 TILE  Change Addition  NAME  HILL, LOUIS JR. S20 DELETE 11 TILE  Change Addition  MCCORD, GUYTE P. 111  ANAME  MCCORD, GUYTE P. 111  ANAME  D D DELETE 41 TILE  D Change Addition  TALLAHASSEE FL 32303  TALLAHASSEE FL 32303  TALLAHASSEE FL 32303  DELETE 51 TILE  D Change Addition  TALLAHASSEE FL 32303  DELETE 51 TILE  D Change Addition  ANAME  STREET ADDRESS  STREET ADDRESS  TALLAHASSEE FL 32303  TALLAHASSEE FL 32303  DELETE 51 TILE  D Change Addition  TALLAHASSEE FL 32303  TALLAHAS				18	וי	Name				
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11. Pursuant to the provisions of Soctions 517,0502 and 617 1508. Florids 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 and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE  SO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE  SO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE  SO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE  PLETCHER, JOANN  12 NME  FLETCHER, JOANN  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE  PD D DELETE  21 INTE  D Change Addition  ANAME  SIREL ADDRESS  CITY-ST-2P  INTE  D DELETE  13. TREET ADDRESS  TALLAHASSEE FL 32308  14 CITY-ST-2P  INTE  D DELETE  15 INTE  D Change Addition  ANAME  STREET ADDRESS  CITY-ST-2P  TALLAHASSEE FL 32303  ALCITY-ST-2P  TO Change Addition  NAME  UNDSEY, KATHY  SCHAME	TALLAHASSEE FL 32303			8	3					
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SIGNATURE   Signature injector or printed name of regrotioned appear and their dispipatable.   NOTE Registered Agent signature required when reinilating)   DATE	office or re	egistered agent, or both, in the State	of Florida. Such change was a	uthorized I	bν	the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	ourpose of ot the appo	changin sintment	g its registered as registered
12.	SIGNATURE						urred when reinstating)	DATE		
NAME   FLETCHER, JOANN   12 NAME   -02/25/97-0153-002   33 STREET ADDRESS   5394 APPLEDORE LANE   13 STREET ADDRESS   14 CITY-ST-2P   TALLAHASSEE FL 32308   14 CITY-ST-2P				13.	<del>-</del>		ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECT	ORS IN 12
Table   Tabl	TITLE	SD DELETE 1.11		1.1 TITLE	TITLE		ad at 11 at 12 at 12 at 13 at 14 at 15			
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MANE   GILLIS, DOUG   3770 SUFFOLK DRIVE   23 STREET ADDRESS   CITY-ST-ZIP   TALLAHASSEE FL 32308   2. 4 CITY-ST-ZIP   TITLE	CITY - ST - ZIP	TALLAHASSEE FL 32308		1.4 CITY - ST - ZIP		1-21P				
STREET ADDRESS   3770 SUFFOLK DRIVE   23 STREET ADDRESS   24 CITY-ST-ZIP	TITLE	PD	☐ DELETE	2.1 TITLE					Chang	pe 🔲 Addition
TALLAHASSEE FL 32308   2.4 CITY-ST-ZIP   TALLAHASSEE FL 32308   2.4 CITY-ST-ZIP   Change   Addition	NAME			2.2 NAME						
TITLE D DELETE 3.1 TITLE D Change Addition  NAME HILL, LOUIS JR. 3.2 NAME  STREET ADDRESS 5926 MILLER LANDING RD 3.3 STREET ADDRESS  CITY-ST-ZIP TALLAHASSEE FL 32312 3.4 CITY-ST-ZIP  TITLE D D DELETE 4.1 TITLE  STREET ADDRESS 503 VINNEDGE RIDE 4.3 STREET ADDRESS  CITY-ST-ZIP TALLAHASSEE FL 32303 4.4 CITY-ST-ZIP  TITLE D D DELETE 5.1 TITLE  D DELETE 5.1 TITLE D Change Addition  NAME DELONEY, JERRY 5.2 NAME  STREET ADDRESS 1881 N MLK BLVD. 5.3 STREET ADDRESS  CITY-ST-ZIP TALLAHASSEE FL 32303 5.4 CITY-ST-ZIP  TITLE TD TALLAHASSEE FL 32303 5.4 CITY-ST-ZIP  TITLE TD TALLAHASSEE FL 32303 6.4 CITY-ST-ZIP  TITLE TALLAHASSEE FL 32303 6.4 CITY-ST-ZIP  TITLE TD TALLAHASSEE FL 32303 6.4 CITY-ST-ZIP  TITLE TALLAHA	STREET ADDRESS	3770 SUFFOLK DRIVE		2.3 STAE	2.3 STREET ADDRESS					
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STREET ADDRESS CITY-SI-ZIP TALLAHASSEE FL 32312  TITLE D MCCORD, GUYTE P. 111 STREET ADDRESS CITY-ST-ZIP TITLE D MCCORD, GUYTE P. 111 STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32303	TITLE		L. DELETE	L L				,	Chang	e L. Addition
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MCCORD, GUYTE P. 111   503 VINNEDGE RIDE   4.3 STREET ADDRESS   503 VINNEDGE RIDE   4.4 CITY-ST-ZIP   503 VINNEDGE RIDE   5.1 TITLE   5.1 TITLE   5.2 NAME   5.2 NAME   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   5.4 CITY-ST-ZIP   5.5 TITLE   5.5 TITLE   5.5 TITLE   5.5 STREET ADDRESS   5.5 CITY-ST-ZIP   5.5 TITLE						T- ZIP	· · · · · · · · · · · · · · · · · · ·	·		1 A J. P. C.
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TALLAHASSEE FL 32303					-					
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						AUDDESS		JI/A	$\mathcal{A}(\mathcal{A})$	,-07 1

14. I do 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 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name