

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741417

FILED
Jan 04, 2011
Secretary of State

Entity Name: ST. FRANCIS OF ASSISI WILDLIFE ASSOCIATION, INCORPORATED

Current Principal Place of Business:

5580 SALEM RD
QUINCY, FL 32352 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 38160
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: 59-1888022 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MUNROE, PETER G
2727 APALACHEE PKWY
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: T
Name: PARKER, BRAD
Address: 217 JOHN KNOX ROAD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: PD
Name: PHIPPS, LAURA
Address: 4975 CLIPPY'S DR
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: D
Name: COLVIN, TERESA
Address: 3013 GREY ABBEY COURT
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: V
Name: BRENNAN, JOHN
Address: 714 LOTHIAN DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: DS
Name: GOMEZ, ELENITA
Address: 714 LOTHIAN DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: DT
Name: KISER, JAMES
Address: 4975 CLIPPY'S DR
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DEAN HUMPHREY

MGR

01/04/2011

Electronic Signature of Signing Officer or Director

Date