2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2005 8:00 am Secretary of State

1. Entity Nam	E SANCTUARY OF NORTH	WEST FLORIDA				04-14-200	90091	011 ****6	51.25	
Principal Place of Business Mailing Address 105 "S" STREET 105 "S" STREET PENSACOLA, FL 32505 PENSACOLA, FL 32505					410001 (0000	400563		·2) 8:811 8:811 819	111 05 B 2 4 02 4	
2. Principal Place of Business 3. Ma		3. Mailing Address	Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01282005	Chg-NP	CR2E0	37 (10/03)		
City & State		City & State	City & State		4. FEI Number Applied For 59-222303 Not Applicable			oplied For of Applicable		
Zip	Country	Zip	Country .		5. Certificate of	Status Desired		\$8.75 Add	ditional	
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and A	ddress of New	Registered	Agent		
			Name							
105 NORT	IN, DOROTHY W TH "S" STREET		Street Address (P.O. Box Number is Not Acceptable)				
PENSACC	DLA, FL 32505									
			City				Fl	Zip Cod	е	
8. The above the obligat	named entity submits this statement follows of registered agent.	or the purpose of changing its re	gistered office or	r registere	ed agent, or both,	in the State of F	Florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F								
			registered Agent signati	ure required	when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Be Added to Fees		Make chec	k payable t		
10.	-	9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Be	Fid	Make chec orida Depa	rtment of S	tate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2005	9. Election Camp Trust Fund Co	arign Financing ntribution. 11. IIILE NAME STREET ADDRESS	D STEAM	\$5.00 May Be Added to Fees	IGES TO OFFICE	Make chec orida Depa	rtment of S	tate	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DI PT MCMANAMY, PARMELIE 105 "S" STREET PENSACOLA, FL 32505 DP JORDAN, BOB	9. Election Camp Trust Fund Co	ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D STEAM IOS NO PENSA D GARY	\$5.00 May Be Added to Fees DDITIONS/CHAN LER LA WHE! WITH "S" STI COLA, FL 32	FIGES TO OFFICE	Make chec orida Depa	rtment of S	tate	
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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

SIGNATURE

Date

Date

Date

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Date

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ATTACHMENT

WILDLIFE SANCTUARY OF NORTHWEST FLORIDA, INC. DOCUMENT # 765175

ADDITIONS TO DIRECTORS...

40056340

DIRECTOR
SANDY UARICH, DVM
105 NORTH "S" STREET
PENSACOLA, FL 32505

DIRECTOR

JEMISON MIMS

105 NORTH "S" STREET
PENSACOLA, FL 32505

DIRECTOR
DALE DEAN
105 NORTH "S" STREET
PENSACOLA, FL 32505