

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N24268

1. Entity Name

WILDLIFE RESCUE SERVICE OF FLORIDA, INC.

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90034 047 ****70.00

Principal Place of Business
2316 24TH AVENUE WEST
BRADENTON FL 34205
US

Mailing Address
P.O. BOX 10475
PO BOX 10475
BRADENTON FL 34282-0475
US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

4. FEI Number 65-0023424
Applied For
Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
SMITH, LAWRENCE R.
2316 24TH AVENUE WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DMC SMITH, LAWRENCE R. 2316 24TH AVE W BRADENTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SMITH, ELLIE T. 2316 24TH AVE W BRADENTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FANSLER, DANIEL 810-A 60TH AVE TERR W BRADENTON FL 34207	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTR MOSSLER, MICHAEL DR. 1511 FLORIDA BLVD BRADENTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS DOUGHTY, TRACY 7309 ALDERWOOD DR SARASOTA FL 34243	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HUMPHREYS, SUSAN 2915 Fiddlers Bend Palmetto, FL 34221	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: Lawrence R. Smith 5/26/00 941-750-9453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)