## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 15, 2007 8:00 am Secretary of State DOCUMENT # N32977 02-15-2007 90054 024 \*\*\*\*70.00 BACK TO NATURE WILDLIFE, INC. Principal Place of Business Mailing Address 18515 E. COLONIAL DR ORLANDO FL 32820 18515 E. COLONIAL DR ORLANDO FL 32820 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-2961216 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHAW, CARMEN M Street Address (P.O. Box Number is Not Acceptable) 18515 E. COLONIAL DRIVE ORLANDO FL 32820 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE S Delete TITLE Change Addition NAMI MANDY FREEMAN JACOBY, GRACIELA NAME 1866 RopperFIELD COUT STREET ADDRESS 4718 BEACH BLVD STREET ADDRESS CITY - SI - ZIP ORLANDO FL 32803 CITY-ST-ZIP ORIANDO FI 32835 Delete DICE PARS JAMES BRONZO TITLE THE Change Addition BRUCE, CAT NAM NAM 805 BARON RD STREET ADDRESS STREET ADDRESS 1549 TYREL DR CITY - ST - ZIP CITY+ST-ZIP ORLANDO FL 32818 EXEC. DIRECTOR CHRIMEN IN SHAW 18515 E CHONIA! DI ONIANO ORIANDO FI 32828 TITLE ☐ Delete TITLE ☐ Change MAM DUNDY, DAVID NAME STREET ADDRESS STREET ADDRESS 23 E STEELE ST CITY-SI-ZIP CHY-ST-7P DATANDO FL 32800 ORLANDO FL 32804 TITLE Delete THE DΥ Change ☐ Addition NAME CUNNIFF, DHORI NAME STREET ADDRESS STREET ADDRESS 135 FLORIDA BLVD CHY-SI-ZIP CHY-ST-ZIP MERRITT ISLAND FL 32953 HTLL IIIIE ☐ Change ■ Addition KING, THOMAS M NAME NAME STREET ADDRESS 1538 COLDWELL ST S 18FET ADDRESS CITY-SI-ZIP ORLANDO FL 32828 CITY ST-7IP TITLE D ☐ Defete HILE Change Addition NAME LADNEY, JUDY NAME STREET ADDRESS | 609 VASSAR ST STREET ADDRESS ORLANDO FL 32804 CITY-ST-ZIP

**FILED** 

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.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DA/66/07 407/5/8-833/