

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001329

FILED  
Jan 26, 2011  
Secretary of State

Entity Name: FLORIDA WILDLIFE CARE, INC.

**Current Principal Place of Business:**

3400 SE 15ST  
GAINESVILLE, FL 326411405

**New Principal Place of Business:**

3400 SE 15 ST  
GAINESVILLE, FL 326411405 US

**Current Mailing Address:**

3400 SE 15ST  
GAINESVILLE, FL 326411405

**New Mailing Address:**

3400 SE 15 ST  
GAINESVILLE, FL 326411405 US

FEI Number: 59-3178292

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STRAUB, LESLIE E DIR  
2284 NW 34TH PL  
GAINESVILLE, FL 32605 US

**Name and Address of New Registered Agent:**

STRAUB, LESLIE E  
2284 NW 34TH PL  
GAINESVILLE, FL 32605 US

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: LESLIE E STRAUB

01/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: STRAUB, LESLIE  
Address: 2284 NW 34TH PL  
City-St-Zip: GAINESVILLE, FL

Title: PD  
Name: SKIMMING, KAREN  
Address: 6320 NW 120 AVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VTD  
Name: HAYES, PEARSE  
Address: 5733 SW 75TH ST  
City-St-Zip: GAINESVILLE, FL 32608

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: LESLIE E STRAUB

DIR

01/26/2011

Electronic Signature of Signing Officer or Director

Date