

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005029

1. Entity Name

WILDLIFE FOUNDATION OF FLORIDA, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90043 014 ****61.25

Principal Place of Business

620 S MERIDIAN ST
TALLAHASSEE FL 32399-1600

Mailing Address

620 S MERIDIAN ST
TALLAHASSEE FL 32399-6543

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P. O. Box 11010

Suite, Apt. #, etc.

City & State
Tallahassee, Fl

Zip
32302

Country

4. FEI Number

59-3277808

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORRELL, L R
620 S MERIDIAN ST
TALLAHASSEE FL 32399-1600

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

1/14/00

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 ☐ Delete
NAME BLAKE, WILLIAM M
STREET ADDRESS 4611 W SUNSET BLVD
CITY-ST-ZIP TAMPA FL

TITLE ☐ Delete
NAME PD
STREET ADDRESS BOSTICK, WILLIAM G JR
CITY-ST-ZIP P.O. BOX 1789 N/A
WINTER HAVEN FL 33882

TITLE ☐ Delete
NAME D
STREET ADDRESS BRANTLY, ROBERT M COL
CITY-ST-ZIP 7221 COVEY TRACE
TALLAHASSEE FL 32308

TITLE ☐ Delete
NAME VD
STREET ADDRESS BREMER, LINDA
CITY-ST-ZIP 1530 MAYFAIR RD
JACKSONVILLE FL 32207

TITLE ☐ Delete
NAME STD
STREET ADDRESS EGBERT, ALLAN L DR
CITY-ST-ZIP 620 S MERIDIAN ST
TALLAHASSEE FL 32399

TITLE ☐ Delete
NAME VD
STREET ADDRESS IRELAND, KATE
CITY-ST-ZIP FOSHALEE, 13656 TENACITY LANE
TALLAHASSEE FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS Route 1, Box 155A
CITY-ST-ZIP Garnett, SC 29922

TITLE ☒ Change ☐ Addition
NAME Brantly, Robert M.
STREET ADDRESS 8005 Freshwater Farms Rd.
CITY-ST-ZIP Tallahassee, FL 32308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 332312-9745

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 an address like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Allan L. Egbert Board of Directors (850)487-3

Registered Agent

1/14/00

(850)488-4676

Date

Daytime Phone #