2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000005029

Entity Name: WILDLIFE FOUNDATION OF FLORIDA, INC.

FILED Jan 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			Ne	New Principal Place of Business:		
620 S MERIDIAN ST TALLAHASSEE, FL 323991600						
Current Mailing Address:			Ne	New Mailing Address:		
P.O. BOX 11010 TALLAHASSEE, FL 32302						
FEI Number:	59-3277808	FEI Number Applied For ()	FEI Number	r Not Applic	able ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
MORRELL, L R 620 S MERIDIAN ST TALLAHASSEE, FL 323991600 US				MARA, ROSEMARY SEC. 620 S MERIDIAN ST TALLAHASSEE, FL 323991600 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: ROSEMARY MARA						01/30/2002
Electronic Signature of Registered Agent Date						
OFFICERS AND DIRECTORS:			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ()[BLAKE, WILLIAN 4611 W SUNSET TAMPA, FL					() Change () Addition
Title: Name: Address: City-St-Zip:	PD () E BOSTICK, WILLI RT 1 BOX 155A GARNETT, SC 2		Add	me: dress:		
Title: Name: Address: City-St-Zip:	D ()[BRANTLY, ROBE 8005 FRESHWA' TALLAHASSEE,	TER FARMS RD				()Change ()Addition
Title: Name: Address: City-St-Zip:	VD () E BREMER, LINDA 1530 MAYFAIR F JACKSONVILLE,	RD	Ado	me: dress:	BREMER, LI 1530 MAYF	
Title: Name: Address: City-St-Zip:	STD ()E EGBERT, ALLAN 620 S MERIDIAN TALLAHASSEE,	ST				() Change () Addition
Title: Name: Address: City-St-Zip:	IRELAND, KATÉ	Delete 56 TENACITY LANE FL 323129745		me: dress:	RAINEY, C.	TH DIXIE HIGHWAY

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ALLAN L. EGBERT STD 01/30/2002

DAVID J. NYE P. O. BOX 117168 GAINESVILLE, FL 32211-7168