

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765175

Entity Name: WILDLIFE SANCTUARY OF NORTHWEST FLORIDA
INCORPORATED**Current Principal Place of Business:**105 NORTH S ST
PENSACOLA, FL 32505**Current Mailing Address:**105 NORTH S ST
PENSACOLA, FL 32505**FEI Number: 59-2222303****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAUFMANN, DOROTHY W
105 NORTH S ST
PENSACOLA, FL 32505 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:** DOROTHY KAUFMANN

02/09/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP	Title	PRESIDENT
Name	STEIMEL, LARRY	Name	BARNARD, DEBBIE
Address	105 NORTH S ST	Address	105 NORTH S ST
City-State-Zip:	PENSACOLA FL 32505	City-State-Zip:	PENSACOLA FL 32505
Title	DIRECTOR	Title	DIRECTOR
Name	JONES, MARY	Name	JORDAN, ROBERT
Address	105 NORTH S ST	Address	105 NORTH S ST
City-State-Zip:	PENSACOLA FL 32505	City-State-Zip:	PENSACOLA FL 32505
Title	DIRECTOR	Title	DIRECTOR
Name	KAUFMANN, JOHN	Name	WEBB, FRANCES
Address	105 NORTH S ST	Address	105 NORTH S ST
City-State-Zip:	PENSACOLA FL 32505	City-State-Zip:	PENSACOLA FL 32505
Title	DIRECTOR	Title	SECRETARY
Name	O'CONNOR, MOLLY	Name	WHATLEY, SAM
Address	105 NORTH S ST	Address	105 NORTH S STREET
City-State-Zip:	PENSACOLA FL 32505	City-State-Zip:	PENSACOLA FL 32505

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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: DIANE WAHLQUIST**TREASURER**

02/09/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name WAHLQUIST, DIANE
Address 105 NORTH S STREET
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name ODOM, ELLEN
Address 105 NORTH S STREET
City-State-Zip: PENSACOLA FL 32505