

2019 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

04/03/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name STEIMEL, LARRY
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title VP
Name BARNARD, DEBBIE
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name JONES, MARY
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name JORDAN, ROBERT
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name KAUFMANN, JOHN
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name WEBB, FRANCES
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title PRESIDENT
Name O'CONNOR, MOLLY
Address 105 NORTH S ST
City-State-Zip: PENSACOLA FL 32505

Title SECRETARY
Name WHATLEY, SAM
Address 105 NORTH S STREET
City-State-Zip: PENSACOLA FL 32505

Continues on page 2

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**

04/03/2019

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