2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100002883

Entity Name: SEACREST WOLF PRESERVE, INC.

Current Principal Place of Business:

3449 BONNETT POND RD CHIPLEY, FL 32428

Current Mailing Address:

PO BOX 160 WAUSAU, FL 32428 US

FEI Number: 59-3709419

Name and Address of Current Registered Agent:

NOLIN , NATHAN G 5407 COTTON STREET GRACEVILLE, FL 32440 US Certificate of Status Desired: No

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	E: NATHAN G. NOLIN		03/06/2024
	Electronic Signature of Registered Agent		Date
Officer/Director Detail :			
Title	BOARD MEMBER, TREASURER	Title	WILDLIFE LICENSEE, PRESIDENT
Name	JOHNSON, GREGORY O'NEAL	Name	BANKS, LINDSEY NICOLE
Address	102 NANNIE OLA COURT	Address	1728 SALEM DRIVE
City-State-Zip:	LASCASSAS TN 37085	City-State-Zip:	CHIPLEY FL 32428
Title	BOARD MEMBER, SECRETARY	Title	BOARD MEMBER
Name	BANKS, JENNIFER LEIGH	Name	KINDELSPIRE , JAY
Address	2889 CHATSWORTH HWY 225 NE	Address	6095 HWY 90
City-State-Zip:	CALHOUN GA 30701	City-State-Zip:	MARIANNA FL 32446
Title	BOARD MEMBER		
Name	FARRELL, JORDAN DR.		
Address	1900 SIXTH AVE		
City-State-Zip:	CHIPLEY FL 32428		

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: LINDSEY BANKS

03/06/2024 PRESIDENT/LICENSEE

FILED Mar 06, 2024 Secretary of State 6729007054CC

Electronic Signature of Signing Officer/Director Detail