

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002883

Entity Name: SEACREST WOLF PRESERVE, INC.**Current Principal Place of Business:**3449 BONNETT POND RD
CHIPLEY, FL 32428**Current Mailing Address:**3449 BONNETT POND RD
CHIPLEY, FL 32428 US**FEI Number: 59-3709419****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WATKINS, WILLIAM W
3449 BONNETT POND RD
CHIPLEY, FL 32428 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	WATKINS, WILLIAM W
Address	3449 BONNETT POND RD
City-State-Zip:	CHIPLEY FL 32428

Title	VP
Name	WATKINS, CYNTHIA E
Address	3449 BONNETT POND RD
City-State-Zip:	CHIPLEY FL 32428

Title	BM
Name	DEGREGORIA, JAMES F
Address	7205 HIAWATHA STREET
City-State-Zip:	PANAMA CITY FL 32404

Title	BM
Name	DEGREGORIA, JOANNE M
Address	7205 HIAWATHA STREET
City-State-Zip:	PANAMA CITY FL 32404

Title	BM
Name	LEONARD, CHARLES D
Address	1800 LAUREL OAK LANE
City-State-Zip:	VIRGINIA BEACH VA 23453

Title	BM
Name	LEONARD, RHONDA M
Address	1800 LAUREL OAK LANE
City-State-Zip:	VIRGINIA BEACH VA 23453

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: CYNTHIA E. WATKINS**VP****02/04/2014**

Electronic Signature of Signing Officer/Director Detail

Date