

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003710

**FILED**  
**Feb 21, 2017**  
**Secretary of State**  
**CC7925411934**

**Entity Name:** WILDLIFE CENTER OF VENICE, INC.

**Current Principal Place of Business:**

3252 BORDER RD  
VENICE, FL 34292

**Current Mailing Address:**

3252 BORDER RD  
VENICE, FL 34292

**FEI Number:** 20-1065695

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARTON, LINDA  
235 SNYDER DR  
VENICE, FL 34292 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:** LINDA BARTON

02/21/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BARTON, KEVIN R  
Address 1300 JACKSON RD  
City-State-Zip: VENICE FL 34292

Title VP  
Name CORL, LARRY  
Address 1220 GROVELAND AVE  
City-State-Zip: VENICE FL 34285

Title S/T  
Name BARTON, LINDA  
Address 235 SNYDER DR  
City-State-Zip: VENICE FL 34292

*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:** LINDA BARTON

SEC/TRES

02/21/2017

Electronic Signature of Signing Officer/Director Detail

Date