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.

PRESIDENT

SIGNATURE: JUDY LICCINI

Electronic Signature of Signing Officer/Director Detail

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

Officer/Director Detail :

Title	Р	Title	TREASURER
Name	LICCINI, JUDY	Name	RISTAU, SALLY
Address	20 CARROTWOOD COURT	Address	5210 WESTERN DR.
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	SAINT JAMES CITY FL 33956
Title	SECRETARY	Title	FUNDRASING CHAIR
Name	ANDERSON, LORRAINE	Name	DUFFY, JACANNE
Address	3101 GUADALUPE DRIVE	Address	16240 BRANCO DRIVE
City-State-Zip:	PUNTA GORDA FL 33950	City-State-Zip:	PUNTA GORDA FL 33955
Title	OFFICER		
Name	NELSON, PENNY		
Address	3400 PONCE DE LEON PKWY		
City-State-Zip:	PUNTA GORDA FL 33950-6312		

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09106

Entity Name: PEACE RIVER WILDLIFE CENTER, INC.

Current Principal Place of Business:

3400 PONCE DE LEON PKWY PUNTA GORDA, FL 33950-6312

Current Mailing Address:

3400 PONCE DE LEON PKWY PUNTA GORDA. FL 33950-6312 US

FEI Number: 59-2535665

Name and Address of Current Registered Agent:

LICCINI, JUDY 20 CARROTWOOD CT FORT MYERS, FL 33919 US Certificate of Status Desired: Yes

Date

01/28/2013 Date