

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005029

Entity Name: FISH & WILDLIFE FOUNDATION OF FLORIDA, INC.**Current Principal Place of Business:**620 S MERIDIAN ST
TALLAHASSEE, FL 32399-1600**Current Mailing Address:**P.O. BOX 11010
TALLAHASSEE, FL 32302**FEI Number: 59-3277808****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BRADFORD, JAMES W
2574 SEAGATE DRIVE
STE. 100
TALLAHASSEE, FL 32301 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	C
Name	BARRETO, RODNEY
Address	235 CATALONIA AVENUE
City-State-Zip:	CORAL GABLES FL 33134

Title	CEO
Name	BOSTON, CHARLES B
Address	1335 SEALE DRIVE
City-State-Zip:	ALPHARETTA GA 30022

Title	S
Name	PARKER, CONNIE
Address	PO BOX 3240
City-State-Zip:	ANNAPOLIS MD 21403

Title	CFO
Name	BRADFORD, JAMES W
Address	2574 SEAGATE DRIVE STE. 100
City-State-Zip:	TALLAHASSEE FL 32301

Title	TREASURER
Name	SWINDAL, STEPHEN W
Address	908 S. 20TH ST.
City-State-Zip:	TAMPA FL 33605

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: JAMES W. BRADFORD**CFO****02/19/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date