

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004388

Entity Name: WILDLANDS PROJECT, INC.**Current Principal Place of Business:**1829 10TH AVE W
SUITE B
SEATTLE, WA 98119**Current Mailing Address:**1829 10TH AVE W
SUITE B
SEATTLE, WA 98119 US**FEI Number:** 16-1402497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUTCHER, TRACEY
5230 HOLDEN RD
COCOA, FL 32927 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:** TRACEY BUTCHER

03/19/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name TERBORGH, JOHN
Address 3705-C ERWIN RD
City-State-Zip: DURHAM NC 27705

Title DIRECTOR
Name BOWERS, KEITH
Address 2120 NOISETTE BLVD, SUITE 106B
City-State-Zip: NORTH CHARLESTON SC 29405

Title S
Name JOHNS, DAVID
Address PO BOX 725
City-State-Zip: MCMINNVILLE OR 97128

Title T
Name AMENT, ROB
Address 417 EAST STORY ST
City-State-Zip: BOSEMAN MT 59715

Title ED
Name COSTELLO, GREG
Address 3421 SW HOLLY ST
City-State-Zip: SEATTLE WA 98126

Title P
Name SMITH, SUSANNAH
Address 2913 W COACHMAN AVE
City-State-Zip: TAMPA FL 33611

Title VP
Name OLSON, STEVE
Address 8403 COLESVILLE RD
SUITE 710 SUITE B
City-State-Zip: SILVER SPRING MD 20910

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: GREGORY COSTELLO**EXECUTIVE OFFICER**

03/19/2014

Electronic Signature of Signing Officer/Director Detail

Date