

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33563

Entity Name: DEFENDERS OF WILDLIFE, INC.**Current Principal Place of Business:**1130 17TH STREET, N.W.
WASHINGTON, DC 20036**Current Mailing Address:**1130 17TH STREET, N.W.
WASHINGTON, DC 20036 US**FEI Number: 53-0183181****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**URS AGENTS, LLC
1540 GLENWAY DRIVE
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 SR VP
Name BARRY, DONALD
Address 1130 17TH STREET, NW
City-State-Zip: WASHINGTON DC 20036

Title VC
Name WALLACE, SUSAN
Address 1130 17TH STREET, NW
City-State-Zip: WASHINGTON DC 20036

Title P
Name RAPPAPORT CLARK, JAMIE
Address 1130 17TH STREET, NW
City-State-Zip: WASHINGTON DC 20036

Title D
Name CORWIN, JEFF
Address 1130 17TH STREET, NW
City-State-Zip: WASHINGTON DC 20036

Title TREASURER
Name RICHARD , KOPCHO
Address 1130 17TH STREET, NW
City-State-Zip: WASHINGTON DC 20036

Title CHAIRMAN
Name MCINTOSH, WINSOME
Address 1130 17TH STREET, N.W.
City-State-Zip: WASHINGTON DC 20036

Title SECRETARY
Name GABEL, CAROLINE D.
Address 1130 17TH STREET NW
City-State-Zip: WASHINGTON DC 20036

Title COO
Name STOFAN, JAMES
Address 1130 17TH STREET, N.W.
City-State-Zip: WASHINGTON DC 20036

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 STOFAN**COO****03/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date