2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2007 8:00 am Secretary of State

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FISHÉATING CREEK WILDLIFE SANCTUARY, INC. 40000000 Principal Place of Business Mailing Address 4700 S.W. 74 STREET 4700 S.W. 74 STREET SOUTH MIAMI, FL 33143-5097 SOUTH MIAMI, FL 33143-5097 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-1608971 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MILLEDGE, LEWIS D. JR. Street Address (P.O. Box Number is Not Acceptable) 4700 S.W. 74TH STREET SO. MIAMI, FL 33143-6117 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE $\mathcal{T}_{\mathbf{D}}$ ☐ Addition KERN, RICHARD NAME NAME STREET ADDRESS 23050 SW 156 AVE STREET ADDRESS MIAMI, FL 33170 CITY-ST-ZIP CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change Addition NAME MILLEDGE, LEWIS D., JR. NAME STREET ADORESS 4700 S W 74TH STREET STREET ADDRESS CITY-ST-ZIP S.MIAMI, FL 33143 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition KERN, JAMES W. NAME 14403 S.W. 142ND COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME RICHARDSON, ROBERT A NAME STREET ADDRESS 2055 WOOD STREET, SUITE 202 STREET ADDRESS SARASOTA, FL 342377929 CITY-ST-7/P CITY - ST - ZIP Delete TITLE TD TITLE Addition James L. LRHTRONG, IV TURNER, DAVID NAME NAME ONE SOUTHTRUST THIRD AVE, SUITE 1440 STREET ADDRESS STREET ADDRESS 12920 S.W. 69 RYC CITY-ST-ZIP MIAMILEL 33131 CITY ST-ZIP Miami HHE P Delete THILE Change ☐ Addition RIEDER, THOMAS NAME NAME STREET ADDRESS 9990 SW 77 AVE, SUITE 300 STREET ADDRESS CHY-ST-7IP MIAMI, FL 33156 CITY - ST - ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 607. Florida Statutes; and that my, name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #