

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 503236

1. Entity Name
PEACE RIVER WILDLIFE SANCTUARY, INC.



Principal Place of Business
33 SW 18TH TERRACE
MIAMI, FL 33129 US

Mailing Address
33 SW 18TH TERRACE
MIAMI, FL 33129 US



02202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1670696	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WARREN, ROBERT H
33 S.W. 18TH TERRACE
MIAMI, FL 33129

**DO NOT WRITE
IN THIS SPACE**

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)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000643386
03/01/07-80084-006 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	AMDOR, ROBERT
STREET ADDRESS	13220-172 HOUSTON AVE
CITY-ST-ZIP	HUDSON, FL 34667

TITLE	VD
NAME	MAZOREK, CARL
STREET ADDRESS	2923 CARMIA DR.
CITY-ST-ZIP	ORLANDO, FL 32806

TITLE	STD
NAME	WARREN, ROBERT
STREET ADDRESS	33 SW 18TH TERR
CITY-ST-ZIP	MIAMI, FL 33129

TITLE	D
NAME	KERN, DREW
STREET ADDRESS	14925 SW 85TH AVE
CITY-ST-ZIP	MIAMI, FL 33158

TITLE	D
NAME	OTTO, JUDITH
STREET ADDRESS	545 W. RICH AVENUE
CITY-ST-ZIP	DELAND, FL 32720

TITLE	D
NAME	HERBERT, THOMAS A
STREET ADDRESS	364 SW 19TH ROAD
CITY-ST-ZIP	MIAMI, FL 33129

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IN THIS SPACE**

12. I hereby 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 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 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: ROBERT H. WARREN *Robert H. Warren* **2/20/07** **305 812 0889**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #