

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753132

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** INSTITUTE OF WILDLIFE SCIENCES, INC.

**Current Principal Place of Business:**

16531 SW 81 AVENUE  
PALMETTO BAY, FL 33157 US

**New Principal Place of Business:**

**Current Mailing Address:**

16531 SW 81 AVENUE  
PALMETTO BAY, FL 33157 US

**New Mailing Address:**

**FEI Number:** 59-2031166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRIAN, MEALEY K  
16531 SW 81 AVENUE  
VILLAGE OF PALMETTO BAY, FL 33157 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MEALEY, BRIAN  
**Address:** 16531 SW 81 AVENUE  
**City-St-Zip:** PALMETTO BAY, FL 33157 US

**Title:** VD  
**Name:** BALDWIN, JOHN  
**Address:** SW 26TH STREET  
**City-St-Zip:** SUNRISE, FL 33324 US

**Title:** TD  
**Name:** ZIEGLER, CYNTHIA  
**Address:** 8440 S.E. 21ST STREET  
**City-St-Zip:** OCALA, FL 34480 US

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:** BRIAN K. MEALEY

PRES

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date