

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2005 8:00 am
Secretary of State

05-11-2005 90126 048 ****61.25

DOCUMENT # 764470.																					
1. Entity Name FLORIDA CHAPTER OF THE WILDLIFE SOCIETY, INC.																					
Principal Place of Business SEMINOLE RANGER DISTRICT 40929 SR 19 UMATILLA, FL 32784 US		Mailing Address SEMINOLE RANGER DISTRICT 40929 SR 19 UMATILLA, FL 32784 US																			
2. Principal Place of Business T.M. Goodwin WMA Suite, Apt. #, etc. 3200 T.M. Goodwin Rd City & State Fellsmere FL Zip 32948 Country USA		3. Mailing Address T.M. Goodwin WMA Suite, Apt. #, etc. 3200 T.M. Goodwin Rd City & State Fellsmere FL Zip 32948 Country USA																			
4. FEI Number 23-7035894		Applied For <input type="checkbox"/> Not Applicable																			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																			
6. Name and Address of Current Registered Agent SEKERAK, CARRIE SEMINOLE RANGER DISTRICT 40929 SR 19 UMATILLA, FL 32784		7. Name and Address of New Registered Agent Name <u>Rockwood, Stephen</u> Street Address (P.O. Box Number is Not Acceptable) 3200 T.M. Goodwin Road City <u>Fellsmere</u> <u>FL</u> Zip Code <u>32948</u>																			
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 <u>[Signature]</u> for <u>Stephen Rockwood</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>5/10/05</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>																			
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																			
Make check payable to Florida Department of State																					
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: <u>[Signature]</u> <u>Stephen Stiegler</u>		Date <u>5/10/05</u> Daytime Phone # <u>850.488.3831</u>																			