

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# 765313

Entity Name: "DING" DARLING WILDLIFE SOCIETY, INC.

Current Principal Place of Business:

C/O GARY OGDEN
1 WILDLIFE DR.
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

C/O GARY OGDEN
1 WILDLIFE DR.
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-2240895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OGDEN, GARY
2366 E MALL DR
FORT MYERS, FL 33901 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: P () Delete
Name: SPRANKLE, JAMES
Address: 1147 GOLDEN OLIVE CT
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: CASSELL, SUSAN V P
Address: 2385 WULFERT RD
City-St-Zip: SANIBEL, FL 33957

Title: TD () Delete
Name: ALBERT, CRAIG TRES
Address: 1201 SANDCASTE RD.
City-St-Zip: SANIBEL, FL 33957

Title: S () Delete
Name: BALDWIN, THERESA
Address: 1555 SAND CASTLE RD
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: LESCH, DONALD
Address: 920 BEACH RD
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: HULIT, DICK
Address: 800 LIMPET DR.
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CASSELL, SUSAN PRES
Address: 2385 WULFERT RD
City-St-Zip: SANIBEL, FL 33957

Title: D (X) Change () Addition
Name: SCOTT, JIM V P
Address: 5117 SEA BELL RD, UNIT C-201
City-St-Zip: SANIBEL, FL 33957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MCCABE, JOHN
Address: 2688 COCONUT
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GARY OGDEN

OM

01/07/2008

Electronic Signature of Signing Officer or Director

_____ Date