2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003125

FILED Apr 18, 2007 Secretary of State

Entity Name: NATIONAL WILD TURKEY FEDERATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	New Principal Place of Business:	
	STA ROAD LD, SC 29824	1			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
P.O. BOX EDGEFIEI	530 LD, SC 28824	1			
FEI Number	: 57-0564993	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desire	ed ()	
Name and	d Address of	Current Registered Agent:	Name and Address of New Registered Agent:		
MORGAN, ZACK 280 OVERLOOK DRIVE WINTER HAVEN, FL 33884 US			MORGAN, ZACK 423 HORSESHOE LANE WINTER HAVEN, FL 33881 US		
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registered office or registered agent,	or both,	
SIGNATURE:			04/18/2007		
	Electro	nic Signature of Registered Ag	ent Date		
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTO	
Title: Name: Address: City-St-Zip:	HINKLE, JIM 121 EAST MA) Delete IN EW, AR 72560	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	PEAK, JERE 1003 BROAD	ST	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	TORHORST, 1 104 NORTH N	IAIN ST	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	V (VALLERY, PE 7940 N TUSC TUCSON, AZ	ANY DR	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	T (GROVES, EA P.O. BOX 604 DALLAS, NC		Title: T (X) Change () Addition Name: GROVES, EARL Address: 1141 NOTTINGHAM City-St-Zip: GASTONIA, NC 28054		
Title: Name: Address: City-St-Zip:	V (KECK, ROB 518 PINE RID EDGEFIELD,		Title: A.T (X) Change () Addition Name: RAY, KENNETH W Address: 770 AUGUSTA ROAD City-St-Zip: EDGEFIELD, SC 29824		

I hereby certify that the information supplied with this filing does not qualify for the 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: KENNETH W. RAY A.T 04/18/2007