2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H57669

City-St-Zip:

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Title:

Name:

Address:

City-St-Zip:

FILED Mar 20, 2008 Secretary of State

Entity Name: WILD BROTHERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 4001 SELVITZ ROAD FT PEIRCE, FL 34981 US **Current Mailing Address: New Mailing Address:** 4001 SELVITZ ROAD FORT PIERCE, FL 34981 FEI Number: 59-2538093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILD, CARL E 119 E MIDWAY ROAD FORT PIERCE, FL 34982 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WILD, CARL E Name: Name: 119 E MIDWAY RD Address: Address: City-St-Zip: FT PIERCE, FL 34982 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: WILD, RAYMOND B Name: Address: 3121 SOUTH INDIAN RIVER DR Address: FT. PIERCE, FL 34982 City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

AVP

HARE, BRIAN

100 SE SERENATA CT.

PORT ST. LUCIE, FL 34983

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SIGNATURE: CARL E. WILD 0 03/20/2008