2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001248

Entity Name: FLORIDA KEYS WILDLIFE RESCUE INC.

FILED Aug 01, 2008 Secretary of State

| Current Pri | ncipal Place of Business: | New Principal Pl | ace of Business: |
|--|--|--|---|
| 1388 AVE B BIG PINE KI | EY, FL 33043 | | |
| Current Mailing Address: | | New Mailing Address: | |
| P O BOX 431392 BIG PINE KEY, FL 33043 | | 1388 AVE B BIG PINE KEY, FL 33043 | |
| FEI Number: 65-0993931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. | | | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | |
| | | f changing its regis | stered 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: | |
| Name: Address: | DP () Delete TOTMAN, MAJA 1388 AVE B BIG PINE KEY, FL 33043 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Name: Address: | D () Delete TOTMAN, PAUL A 1388 AV B BIG PINE KEY, FL 33043 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Name: Address: | D () Delete QUEEN, LAURA 9300 OVERSEAS HWY TAVERNIER, FL 33070 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Name: Address: | C () Delete CLARK, JOHN 281 WEST INDIES DRIVE RAMROD KEY, FL 33053 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| | DVM () Delete SARGENT, LOIS DR PO BOX 521801 MIAMI, FL 33152 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Name: | EE () Delete GARRISON, STUART 1931 SPANISH CHANNEL BIG PINE KEY, FL 33043 | Address: 10803 | (X) Change()Addition , GOTTWALD 6TH AVE THON, FL 33050 |

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: MAYA TOTMAN DIR 08/01/2008