

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State

05-18-2001 91562 040 ****61.25

DOCUMENT # N00000004394

1. Entity Name
RO'S WILDLIFE MISSION, INC.

Principal Place of Business 526 W BLUE SPRINGS AVE ORANGE CITY FL 32763	Mailing Address 526 W BLUE SPRINGS AVE ORANGE CITY FL 32763
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

4. FEI Number 59-365-8110	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
PELL, ROSEMARIE
526 W BLUE SPRINGS AVE
ORANGE CITY FL 32763

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PELL, ROSEMARIE 526 W BLUE SPRINGS AVE ORANGE CITY FL 32763 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD WACHTER, NANCY 193 CEDAR AVE ORANGE CITY FL 32763 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD JOHNSON, JUNE 1550 W 17 ST ORANGE FL 32763 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Signature* **WACHTER**

7-16-01

CR2E037 (5/01)

2001 UNIFORM BUSINESS REPORT (UBR)

Attachment

DOCUMENT # N00000004394

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ORANGE CITY FL 32763

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Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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59-365-8110

Applied For

Not Applicable

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ORANGE CITY FL 32763

Name

Street Address (P.O. Box Number is Not Acceptable)

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STREET ADDRESS 526 W BLUE SPRINGS AVE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE TD
NAME WACHTER, NANCY Delete
STREET ADDRESS 193 CEDAR AVE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE SD
NAME JOHNSON, JUNE Delete
STREET ADDRESS 1550 W 17 ST
CITY-ST-ZIP ORANGE FL 32763

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
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TITLE Change Addition
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STREET ADDRESS
CITY-ST-ZIP

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SIGNATURE:

Nancy Wachter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-10-01

Date

386-725-4966

Daytime Phone #

CR2E037 (10/00)

Attachment # N000004394
10/65

NY
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BANK OF AMERICA NA, NY
146309947 ERASZ 90 P31
65/2AM

MAY 23 01

MAY 16 2001

202ACCT#8009068796

DEPT OF STATE
FOR DEPOSIT ONLY