

DOCUMENT # N00000005624

1. Entity Name

UNIVERSAL WILDLIFE REHABILITATION FOUNDATION, IN

Principal Place of Business

C/O DOMENICK L. LIOCE, ESO.
1645 PALM BEACH LAKES BLVD SUITE 1200
WEST PALM BEACH FL 33418

Mailing Address

C/O DOMENICK L. LIOCE, ESO.
1645 PALM BEACH LAKES BLVD SUITE 1200
WEST PALM BEACH FL 33418

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

13576 JONQUIL PLACE

City & State

City & State

WELLINGTON FLA

Zip

Country

Zip

Country

33414

USA

4. FEI Number

☒ Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIOCE, DOMENICK R.
1645 PALM BEACH LAKES BLVD SUITE 1200
WEST PALM BEACH FL 33418

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 *Barbara L. Perrone*
BARBARA PERRONE - PRESIDENT

1-9-2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☒ AdditionD, P
NAME
STREET ADDRESS
CITY-ST-ZIP
PERRONE, BARBARA
13576 JONQUIL PLACE
WELLINGTON, FL 33414☐ Change ☒ AdditionD, VP, T
NAME
STREET ADDRESS
CITY-ST-ZIP
DESROCHERS, DAVID
13576 JONQUIL PLACE
WELLINGTON, FL 33414☐ Change ☒ AdditionD
NAME
STREET ADDRESS
CITY-ST-ZIP
LIOCE, DOMENICK R.
1645 PALM BEACH LAKES BLVD., SUITE 1200
WEST PALM BEACH, FL 33401☐ Change ☒ AdditionVP, S
NAME
STREET ADDRESS
CITY-ST-ZIP
PERRONE, MARTIN
13576 JONQUIL PLACE
WELLINGTON, FL 33414☐ Change ☐ Addition☐ Change ☐ 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 *Barbara L. Perrone*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-9-2001

(561)
333-8751FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90104 033 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

00036