

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005906

FILED
Apr 30, 2009
Secretary of State

Entity Name: VANISHING SPECIES WILDLIFE, INC.

Current Principal Place of Business:

13321 SW 9TH PLACE
DAVIE, FL 33325

New Principal Place of Business:

6251 SW 41ST COURT
DAVIE, FL 33314

Current Mailing Address:

13321 SW 9TH PLACE
DAVIE, FL 33325

New Mailing Address:

6251 SW 41ST COURT
DAVIE, FL 33314

FEI Number: 65-1037525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22 STREET
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: HARROD, JEFFREY
Address: 13321 SW 9TH PLACE
City-St-Zip: DAVIE, FL 33325

Title: STD () Delete
Name: HARROD, BARBARA
Address: 13321 SW 9TH PLACE
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: ZANDMAN, DIANE
Address: 13321 SW 9TH PLACE
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARROD, JEFFREY
Address: 6251 SW 41ST COURT
City-St-Zip: DAVIE, FL 33314

Title: STD (X) Change () Addition
Name: HARROD, BARBARA
Address: 6251 SW 41ST COURT
City-St-Zip: DAVIE, FL 33314

Title: D (X) Change () Addition
Name: ZANDMAN, DIANE
Address: 6251 SW 41ST COURT
City-St-Zip: DAVIE, FL 33314

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: BARBARA HARROD

STD

04/30/2009

Electronic Signature of Signing Officer or Director

Date