2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 06, 2009
Secretary of State

DOCUMENT# N01000003929

Entity Name: WILD SPOTS FOUNDATION, INC.

Current Principal Place of Business:

757 SE 17TH STREET #230
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

757 SE 17TH STREET #230
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 67-1107332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONTERO, HERIBERTO H
3448 W 14TH COURT
HIALEAH, FL 33012 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: DP ( ) Delete
Name: MONTERO, HERIBERTO H
Address: 3448 W 14TH COURT
City-St-Zip: HIALEAH, FL 33012

Title: DVP ( ) Delete
Name: MONTERO, MARIA
Address: 241 W 20TH ST
City-St-Zip: HIALEAH, FL 33010

Title: DST ( ) Delete
Name: FOX, LEWIS
Address: 6605 NW 93 AVENUE
City-St-Zip: TAMARAC, FL, FL 33321

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: FOX, LEWIS
Address: 6605 NW 93 AVENUE
City-St-Zip: TAMARAC, FL, FL 33321

Title: DST ( ) Change (X) Addition
Name: BARKER, BARRY W
Address: 13510 SW 29TH ST
City-St-Zip: DAVIE, FL 33330

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: BARRY W BARKER DST 07/06/2009

Electronic Signature of Signing Officer or Director — Date