

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001910

FILED
Apr 15, 2009
Secretary of State

Entity Name: WILDLIFE FELLOWSHIP, INC.

Current Principal Place of Business:

11102 WINN RD.
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

11102 WINN RD.
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 75-3049953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEATH, ROBERT G JR.
11102 WINN RD.
RIVERVIEW, FL 33569 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: D () Delete
Name: HEATH, ROBERT G JR.
Address: 11102 WINN RD.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: HEATH, ALISON M
Address: 11102 WINN RD.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: SUMPTER, DAVID
Address: 32846 KNOLLWOOD LANE
City-St-Zip: WESLEY CHAPEL, FL 33545

Title: D () Delete
Name: BUTTS, DEBORAH L
Address: 4321 NEEDLE PALM ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: D () Delete
Name: LORENZEN, WILLIAM A
Address: 12601 SHADOW RUN BLVD.
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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

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: ROBERT G HEATH JR.

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date