


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

4/2

FILED
May 19, 2008 8:00 am
Secretary of State

04-21-2008 90052 008 ****70.00

DOCUMENT # N03000002739 1. Entity Name AMERICAN WOLFPACK FEDERATION, INC.	
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Principal Place of Business 1600 HOPE ST. INTERCESSION CITY, FL 33848	Mailing Address P.O. BOX 302 INTERCESSION CITY, FL 33848
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66011027



03052008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0690718	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MC FANN, ROBERT 1600 HOPE ST. INTERCESSION CITY, FL 33848

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**Filing Fee is \$61.25
Due by May 1, 2008**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MC FANN, ROBERT 1600 HOPE ST. INTERCESSION CITY, FL 33848
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Robert McFann*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-15-08
Date Daytime Phone #