2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003459

FILED Apr 10, 2007 Secretary of State

Entity Name: TREASURE COAST WILDLIFE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8438 SW 48TH AVENUE PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 8438 SW 48TH AVENUE PALM CITY, FL 34990 FEI Number: 65-1223277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCARTHY, TERENCE P ESQ 2400 SE FEDERAL HWY 4 FLOOR STUART, FL 34994 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HERSHEY, SUSAN J OVERDORF, TOBIN Name: Name: 352 RIDGE LN Address: 1251 SW 27TH. ST. SUITE 2 Address: City-St-Zip: STUART, FL 34994 City-St-Zip: PALM CITY, FL 34990 Title: Title: (X) Change () Addition () Delete MCCARTHY, TERRENCE Name: MCNICHOLAS, TOM Name: Address: 2400 SE FEDERAL HWY 4 FLOOR Address: 416 FLAMINGO AVE City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34996 Title: () Delete Title: () Change () Addition VEGA, RUTHANNE Name: Name: 10762 SE FEDERAL HWY Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: () Delete Title: Title: (X) Change () Addition OVERDORF, TOBIN DAVIS, VICKI Name: Name: 1251 SW 27TH. ST. SUITE 2 135 SE MARTIN LUTHER KING, JR, BLVD Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: STUART, FL 34994 Title: () Delete Title: () Change () Addition HESS, GLEN Name: Name: 633 COURTLAND CIRCLE Address: Address: WESTERN SPRINGS, IL 60558 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition VAN VONNO, FRED MCNICHOLAS, TOM Name: Name: Address: 416 FLAMINGO AVE Address: 15 S. RIDGEVIEW ROAD STUART, FL 34996 STUART, FL 34996 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TOBIN OVERDORF P 04/10/2007