

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003459

FILED
Mar 21, 2012
Secretary of State

Entity Name: TREASURE COAST WILDLIFE FOUNDATION, INC.

Current Principal Place of Business:

8626 SW CITRUS BLVD
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

8626 SW CITRUS BLVD
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 65-1223277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVERDORF, TOBIN
1251 SW 27TH ST.
SUITE 2
PALM CITY, FL 34990 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: P
Name: OVERDORF, TOBIN
Address: 1251 SW 27TH. ST. SUITE 2
City-St-Zip: PALM CITY, FL 34990

Title: VP
Name: MCNICHOLAS, TOM
Address: 612 SE DIXIE HWY
City-St-Zip: STUART, FL 34994

Title: T
Name: VEGA, RUTHANNE
Address: 10762 SE FEDERAL HWY
City-St-Zip: HOBE SOUND, FL 33455

Title: D
Name: HAUGK, JAMES
Address: 2964 NE SEWALL'S LANDING WAY
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: D
Name: MARTINELLI, DANIEL
Address: 8626 SW CITRUS BLVD
City-St-Zip: PALM CITY, FL 34990

Title: S
Name: VALLIERE, SUSAN
Address: 79 S. RIVER ROAD
City-St-Zip: STUART, FL 34996

I hereby 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 all other like empowered.

SIGNATURE: DANIEL MARTINELLI

D

03/21/2012

Electronic Signature of Signing Officer or Director

Date