

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jul 18, 2006  
Secretary of State

DOCUMENT# N04000008583

Entity Name: WILDLIFE HAVEN, INC.

**Current Principal Place of Business:**

36906 CHRISTIAN ROAD  
DADE CITY, FL 33523 US

**New Principal Place of Business:**

**Current Mailing Address:**

36906 CHRISTIAN ROAD  
DADE CITY, FL 33523 US

**New Mailing Address:**

FEI Number: 20-1812866      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

RICH, MARY E  
36906 CHRISTIAN ROAD  
DADE CITY, FL 33523 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: RICH, MARY E  
Address: 36906 CHRISTIAN ROAD  
City-St-Zip: DADE CITY, FL 33523 US

Title: D ( ) Delete  
Name: RICH, JESSICA K  
Address: 36906 CHRISTIAN ROAD  
City-St-Zip: DADE CITY, FL 33523 US

Title: D ( ) Delete  
Name: LAUGHERY, CHRISTOPHER A  
Address: 36906 CHRISTIAN ROAD  
City-St-Zip: DADE CITY, FL 33523 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ( ) Change ( ) Addition  
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 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: MARY E RICH

DP

07/18/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date