2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006775

FILED Mar 08, 2012 Secretary of State

Entity Name: WAKULLA WILDLIFE SANCTUARY INC.

Current Principal Place of Business: New Principal Place of Business:

198 EDGAR POOLE RD CRAWFORDVILLE, FL 32327

Current Mailing Address: New Mailing Address:

198 EDGAR POOLE RD CRAWFORDVILLE, FL 32327

FEI Number: 26-0837707 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:

FLORIDA WILD MAMMAL ASSOCATION INC 198 EDGAR POOLE RD CRAWFORDVILLE, FL 32327 US

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: F

 Name:
 BEATTY, CHRIS M MRS

 Address:
 198 EDGAR POOLE RD

 City-St-Zip:
 CRAWFORDVILLE, FL 32327

Title: VP

Name: RICHMOND, JAMES L MR Address: 4242 BENCHAMRK TRACE City-St-Zip: TALLAHASSEE, FL 32317

Title: S

 Name:
 HEPPLE, GILLIAN C MS

 Address:
 1546 RANKIN AVE

 City-St-Zip:
 TALLAHASSEE, FL 32310

Title: T

Name: RICHMOND, ANASTASIA MS Address: 4242 BENCHMARK TRACE City-St-Zip: TALLAHASSEE, FL 32317

Title: D

Name: BEATTY, JESSICA L MS
Address: 198 EDGAR POOLE RD
City-St-Zip: CRAWFORDVILLE, FL 32327

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: CHRIS BEATTY P 03/08/2012