

FILE NOW: FILING FEE IS \$61.25

FILED
Jul 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra S. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *N 28618*
1. Corporation Name
Wildlife Information Services, Inc.

Principal Place of Business
*10330 S. Quarterhorse Ave
Floral City, FL. 34436*

Mailing Address
*P.O. Box 13661
St. Petersburg, FL.
33733-3661*

(352) 687-2376 *(813) 894-9473*

2. Principal Place of Business
21 *3401 - 3rd Avenue No.*
Suite, Apt. #, etc.

22 *St. Petersburg, FL. 33703*

23 *St. Petersburg, FL. 33703*

24 *33703* 25 *USA* 26 *P.O. Box 13661*
Suite, Apt. #, etc.

27 *St. Petersburg, FL.*

28 *St. Petersburg, FL.*

3. Date Incorporated or Qualified *1988* 3a. Date of Last Report *1996*

4. FEI Number *59-2897858* Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

29 *33733-3661* 30 *USA*

Florida Statutes Yes No

9. Name and Address of Current Registered Agent

*Debra A. Parker
10330 S. Quarterhorse Ave.
Floral City, FL. 34436*

10. Name and Address of New Registered Agent

81 Name *Same*

82 Street Address (P.O. Box Number is Not Acceptable)

83 *Same*

84 City *FL* 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* DATE *5/9/97*

12. OFFICERS AND DIRECTORS

TITLE	<i>President / Director</i>	<input type="checkbox"/> DELETE
NAME	<i>Debra A. Parker</i>	
STREET ADDRESS	<i>10330 S. Quarterhorse Avenue</i>	
CITY-ST-ZIP	<i>Floral City, FL. 34436</i>	<i>D</i>
TITLE	<i>Vice President / Chairman</i>	<input type="checkbox"/> DELETE
NAME	<i>Doris H Lillenthal</i>	
STREET ADDRESS	<i>9645 E. Moccasin Slough Rd</i>	
CITY-ST-ZIP	<i>Inverness, FL. 34450</i>	
TITLE	<i>Sec / Treasurer</i>	<input type="checkbox"/> DELETE
NAME	<i>Jennifer M. Van Sant</i>	
STREET ADDRESS	<i>3401 3rd Street North</i>	
CITY-ST-ZIP	<i>St. Petersburg, FL. 33703</i>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	<i>700002233607</i>
63 STREET ADDRESS	<i>-07/09/97--01042--013</i>
64 CITY-ST-ZIP	<i>***70.00</i>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* *Debra A. Parker* Date *5/9/97* Daytime Phone # *(352) 637-2376*

CR2E037 (9/96)