2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N42078

1. Entity Name

WEE CARE, WILDLIFE REHABILITATION CENTER, INC.



Jan 29, 2003 8:00 am Secretary of State 01-29-2003 90171 008 ****70.00

FILED

Principal Plac	(5)											
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HOMESTEAD FL 33032				HOMESTEAD FL 33032								
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Suite, Apt.	. #, etc.		Su	ite, Apt. #, etc.			\dashv		CHECK HERE	IE MAKINO	CHANGE	e e
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City & State	City & State		Cit	City & State			4. FEI Number 65-0251360				<i>f</i>	Applied For
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ΣIP		Country	Zip	,	Col	ıntry	5 . C	Certificate of S	Status Desired		\$8.75 Ad Fee Requir	
	6. Name	and Address of Currer	nt Registere	d Agent			7. N	lame and Ad	dress of New R	egistered a	•	
		V 1.1				Name				<u></u>		
KNOX, PA						Street Addres	s (P.O. Bo	ox Number is	Not Acceptable) - 		<u>.</u>
	V 269 TERR					5567.104166						
HOMESTE	EAD FL 330	32										
						City				FL	Zip Co	de
O The											-	
the above	e named entity tions of registe	submits this statement	for the purpo	ose of changing its	register	ed office or regis	stered age	ent, or both, in	n the State of Flo	rida. Lam	familiar with	i, and accept
SIGNATURE _												
	Signature, typed o	or printed name of registered age	nt and title if appl	icable. (NOTE	: Registere	d Agent signature requ	ired when rei	nstating)		DATE		
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F	FILE NOW:	FEE IS \$61.25		9. Election Can Trust Fund C				00 May Be d to Fees			k Payable tment of	
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

1/27/0