FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N43214 (8)					
HELPING OUR WILDLIFE, INC.					
Principa! Place	of Business	Mailing Address		I 100% Q 040 Q 060 44 0 400% 41 4	BYET AIRN BIAN CIAN BIBN BIBN BIBN DIAN IBBN
202 OAK STREET		P O BOX 801			
5752 DOVE DR. MILTON FL 32570		5752 DOVE DR. MILTON FL 32572			
US	•••	US		3. Date Incorporated or Qualified 05/02/1991	3a. Date of Last Report 05/01/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21 6555 EMPRALO FORGE DR. Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3051434	Not Applicable \$8.75 Additional
Suite, Apt. #	r, etc.	27 Suite, Apr. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 MI CTO	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees
24 3257	O 25 V S	29	30	Florida Statutes	Yes 🔊 No
9. Name and Address of Current Registered Agent 81 Name				10. Name and Address of New Registered Agent	
DDOOMO KENNETU LID			MAISE 12. CLEVEN	gok	
202 OAK STREET			82 Street A	Aridress (P.O. Box Number is Not Acceptable 55 FOREST	e, Dr.
MILTON FL 32570			83		
			84 City	011 =0 ×1	FL 85 Zip Code 10
1) Director to the provisions of Sections 617 0502 and 617 1508 Florida Statutes, the shove-named comporation 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 Tank Company of the name of registerior agent and title if angestable (NOTE: Registered Agent significant significant significant required when reinstagring) DATE OF THE SIGNATURE OF THE SIGNATURE SIGNAT					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1 1 TITLE	PD	Change Addition
NAME	Brooks, Kenneth L Jr. 202 Oak St		1 2 NAME	PRIGE N. CLEVENGER	. 04
STREET ADDRESS City-St-7ip	MILTON FL		1 3 STREET ADDRESS	MILTON FL 3257	DR.
TITLE	D	EX DEFELE	2 1 TITLE	OTS	Change
NAME	ROBERTS, ANDY	,	2 2 NAME	& VIRGINIA t. NOEL	•
SZEROCA 133R12	124 W ROMANO ST		2 3 STREET ADDRESS	5613 HEATHER WAY	
CITY - ST - ZIP	PENSACOLA FL S	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE	MILTON FL 32570	Change Addition
TITLE NAME	BUCKMAN, SAM	Botte	3.2 NAME	KRISTAMORGAN	Mounds -
STREEL ADDRESS	5356 JEREMY DR		3 3 STREET ADDRESS	3345 GIREENBRIARCIR 1	NPT C
CITY - ST - ZiP	MILTON FL		3.4. CITY-ST-ZIP	GULF BRIEFF, FL 3256	
THE	d Roberston, Elba	- STOELETÉ	4 1 TITLE	ID .	☆ Change ☐ Addition
NAME STREET ADDRESS	408 CONECUH ST		4 2 NAME 4.3 STREET ADORESS	JIM HILL SJI ELVA ST.	
CITY - ST-ZIP	MILTON FL		4.4 CITY - ST - ZIP	MILTON, FL 32570)
TITLE		DELETE	5 1 TITLE	<u> </u>	☐ Change 🙀 Addition
NAME			5 2 NAME	DE JOHN CORONET	
S'REET ADDRESS			5 3 STREET ADDRESS	5454 HWY 90	
CITY-ST-ZIP TITLE		DELETE	5 4 CHY-ST-ZIP 6 1 TITLE	MILTON, FL 32570	☐ Change ☑ Addition
NAME			62 NAME	TOOK CLEVENIEW	•
STREET ADDRESS			63 STREET ADDRESS	MILTON, FL 325 70	π De
DiTY+ST+2IP			6.4 CITY-ST-ZIP	MILTON, FL 32570	
14. Ldo herek	by certify that the information supplied v	with this filing is voluntarily fur	rnished and does not qua	alify for the exemption stated in Section 119.	.07(3)(k), Florida Statutes. I further

196. To diseasy certify that the information supplied with this lining is volontary furnished and does not quality for the exemption stated in section 119.07(5)(k), mona statutes. Intime 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: 5

PRIGE LICVENGER

2 8 9 4 904-933-028

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