

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000323

FILED
Feb 23, 2011
Secretary of State

Entity Name: WILDLIFE RECOVERY CENTER OF THE PALM BEACHES, INC.

Current Principal Place of Business:

12567 61 ST. NORTH
ROYAL PALM BEACH, FL 33412

New Principal Place of Business:

Current Mailing Address:

12567 61 ST. NORTH
ROYAL PALM BEACH, FL 33412

New Mailing Address:

FEI Number: 65-0466567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAAB, IRA J
9452 LANTERN BAY CIR.
WEST PALM BEACH, FL 33411 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: PD
Name: ROSENBERG, ELLEN
Address: 12567 61 ST. NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33412

Title: VD
Name: VOORHIS, SUSAN
Address: 12396 62ND LN. N
City-St-Zip: ROYAL PALM BEACH, FL 33412

Title: SD
Name: VOORHIS, ROBERT
Address: 12396 62ND LN. NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33412

Title: TD
Name: LEWIS, SANDY
Address: 12567 61 ST. NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33412

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: ELLEN ROSENBERG

PRES

02/23/2011

Electronic Signature of Signing Officer or Director

Date