

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001776

FILED
Apr 30, 2004
Secretary of State

Entity Name: ALAQUA WILDLIFE MANAGEMENT, INC.

Current Principal Place of Business:

1385 HAROLD AVE
PENSACOLA, FL 32514

New Principal Place of Business:

9248 STANHOPE RD
MILTON, FL 32570

Current Mailing Address:

1385 HAROLD AVE
PENSACOLA, FL 32514

New Mailing Address:

9248 STANHOPE RD.
MILTON, FL 32570

FEI Number: 59-3232639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTINGTON, ROLAND
1385 HAROLD AVE
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

TURNER, PATRICK
9248 STANHOPE RD.
MILTON, FL 32570 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: PATRICK LEE TURNER

04/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WHITTINGTON, ROLAND
Address: 1385 HAROLD AVE
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Delete
Name: TURNER, PAT
Address: 6205 DALISA RD
City-St-Zip: MILTON, FL 32583

Title: STD () Delete
Name: TURNER, MARK
Address: 1946 JUNIPER LAKE RD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TURNER, PATRICK L
Address: 9248 STANHOPE RD.
City-St-Zip: MILTON, FL 32570

Title: VD (X) Change () Addition
Name: TURNER, MARK W
Address: 1946 JUNIPER LAKE RD.
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: STD (X) Change () Addition
Name: DARBY, JEFF A
Address: 317 DARBY RD.
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PATRICK LEE TURNER

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date