

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 09, 2008 08:00 A
Secretary of State

DOCUMENT # N95000004920

1. Entity Name
GOLDEN WATTLE REFUGE, INC.



Principal Place of Business

**425 21ST CT
VERO BEACH, FL 32962**

Mailing Address

**425 21ST CT
VERO BEACH, FL 32962**

DO NOT WRITE IN THIS SPACE



01062008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

65-0617225

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GARDNER, HOMER R
425 21ST COURT
VERO BEACH, FL 32962**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GARDNER, HOMER R
STREET ADDRESS	425 21ST COURT
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	D
NAME	GARDNER, BARBARA J
STREET ADDRESS	425 21ST COURT
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	D
NAME	WHITAKER, DONALD E
STREET ADDRESS	2075 SW 21ST ST.
CITY-ST-ZIP	OKEECHOBEE, FL
TITLE	D
NAME	WHITAKER, CHRISTA
STREET ADDRESS	2075 SW 21ST ST.
CITY-ST-ZIP	OKEECHOBEE, FL 34974
TITLE	D
NAME	COLLISON, SIDNEY H
STREET ADDRESS	2155 15TH AVE., #D-1
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/09/08-80034-017 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

Homer R Gardner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 Jan 2008

Date

772 564 2437

Daytime Phone #