

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90089 029 ****61.25

DOCUMENT # N96000000611

1. Corporation Name

ENVIRO-WILDLIFE, CORP.

Principal Place of Business

3950 COCONUT CIRCLE
NAPLES FL 34104
US

Mailing Address

3950 COCONUT CIRCLE
NAPLES FL 34104
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

3. Date Incorporated or Qualified

02/05/1996

4. FEI Number

65-0646487

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

JONES, JAMES G
2124 AIRPORT RD SOUTH
SUITE 101
NAPLES FL 34104

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
ACOSTA, MICHELLE
3950 COCONUT CIRCLE
NAPLES FL

TITLE ☐ DELETE

D
ACOSTA, JOSEPH
3950 COCONUT CIRCLE S
NAPLES FL 33942

TITLE ☐ DELETE

VP
ACOSTA, JOSEPH
3950 COCONUT CIRCLE
NAPLES FL

TITLE ☐ DELETE

D
ACOSTA, MICHELE
3950 COCONUT CIRCLE S
NAPLES FL 33942

TITLE ☐ DELETE

D
FERNANDEZ, JULIO C
6145 POLLY AVE
NAPLES FL

TITLE ☐ DELETE

D
LA ROCQUE, CARMEN A
3505 OKEECHOBEE ST
NAPLES FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-15-99 941-643-6854

CR2E037 (11/98)