

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003727

FILED
Feb 08, 2012
Secretary of State

Entity Name: WOODLAND WONDERS WILDLIFE REHABILITATION SERVICES, INC.

Current Principal Place of Business:

786 AVENUE C, S.W.
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

786 AVENUE C, S.W.
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 59-3392140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POBJECKY, J. DAVID
786 AVENUE C, S.W.
WINTER HAVEN, FL 33880 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: D
Name: SCHUELE WATERS, JOAN
Address: 2110 BETTY ANN DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: D
Name: POBJECKY, J. DAVID
Address: 786 AVENUE C, S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: BOEREN, SUZANNE
Address: 1420 MERRIFIELD LANE
City-St-Zip: MARIETTA, GA 30062

Title: D
Name: POST, CAROL
Address: 2710 THORNHILL ROAD
City-St-Zip: AUBURNDALE, FL 33873

Title: D
Name: PENNY, JEANNIE
Address: 2107 GARY ROAD
City-St-Zip: AUBURNDALE, FL 33823

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: J. DAVID POBJECKY

D

02/08/2012

Electronic Signature of Signing Officer or Director

Date