

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001221

FILED
Apr 10, 2007
Secretary of State

Entity Name: NATURE COAST WILDLIFE SOCIETY, INC.

Current Principal Place of Business:

11091 ACORN PLACE
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

11091 ACORN PLACE
BROOKSVILLE, FL 34601

New Mailing Address:

FEI Number: 58-2448320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK (BOWER), DEBORAH PRES.
11091 ACORN PLACE
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

BOWER, DEBORAH PRES.
11091 ACORN PLACE
BROOKSVILLE, FL 34601 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: DEBORAH BOWER

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COOK (BOWER), DEBORAH
Address: 11091 ACORN PL
City-St-Zip: BROOKSVILLE, FL 34601

Title: VPD () Delete
Name: LESSARD, BRUCE
Address: 11091 ACORN PL
City-St-Zip: BROOKSVILLE, FL 34601

Title: SD () Delete
Name: MACDONALD, SHERI
Address: 14945 HARMON DR
City-St-Zip: SHADY HILLS, FL 34610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOWER, DEBORAH
Address: 11091 ACORN PL
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DEBORAH BOWER

PD

04/10/2007

Electronic Signature of Signing Officer or Director

Date