

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007208

FILED  
Apr 08, 2004  
Secretary of State

Entity Name: FLORIDA ENDANGERED WILDLIFE, INC.

**Current Principal Place of Business:**

6385 PRESIDENTIAL CT  
108  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 61903  
FORT MYERS, FL 33906

**New Mailing Address:**

FEI Number: 65-0879855

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROOKS, MITCHELL T  
258 BANGSBERG ROAD SE  
PORT CHARLOTTE, FL 33952 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: DV ( ) Delete  
Name: ALDERMAN, LES  
Address: 12800 UNIVERSITY DR #400  
City-St-Zip: FT MYERS, FL 33907

Title: DP ( ) Delete  
Name: CUTSHALL, STEFANIE  
Address: 12800 UNIVERSITY DR #400  
City-St-Zip: FT MYERS, FL 33907

Title: TD ( ) Delete  
Name: CORDELLO, DOUG  
Address: 12800 UNIVERSITY DR #400  
City-St-Zip: FT MYERS, FL 33907

Title: D ( ) Delete  
Name: BEAR, CINDY  
Address: 2055 CENTRAL AVE  
City-St-Zip: FORT MYERS, FL 33901

Title: D ( ) Delete  
Name: CARR, DONNA  
Address: 1701 BOY SCOUT DR  
City-St-Zip: FORT MYERS, FL 33907

Title: D ( ) Delete  
Name: GAYLOR, PHIL  
Address: 2120 W FIRST ST  
City-St-Zip: FORT MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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 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: STEFANIE CUTSHALL

DP

04/08/2004

Electronic Signature of Signing Officer or Director

Date