

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000072056

Entity Name: WILDKATZ EXOTICS, INC.

FILED  
Apr 23, 2010  
Secretary of State

**Current Principal Place of Business:**

16801 MORRIS BRIDGE RD  
THONOTOSASSA, FL 33592 US

**New Principal Place of Business:**

**Current Mailing Address:**

38439 5TH AVE PMB 125  
ZEPHYRHILLS, FL 33542 US

**New Mailing Address:**

FEI Number: 27-0812197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BAIRD, KATHLEEN M  
16801 MORRIS BRIDGE RD  
THONOTOSASSA, FL 33592 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BAIRD, KATHLEEN M  
Address: 16801 MORRIS BRIDGE RD  
City-St-Zip: THONOTOSASSA, FL 33592 US

Title: VP  
Name: WOOD, ANGELA I  
Address: 22151 SAWYERS LN  
City-St-Zip: WILLITS, CA 95490 US

Title: SEC  
Name: GIBSON, LUELLA M  
Address: 136A SYCAMORE LN  
City-St-Zip: OLDSMAR, FL 34677 US

Title: TR  
Name: WOOD, ANGELIA I  
Address: 22151 SAWYERS LN  
City-St-Zip: WILLITS, CA 95490 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHLEEN BAIRD

P

04/23/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date