

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32507

FILED
Apr 09, 2012
Secretary of State

Entity Name: NATIONAL WILDLIFE FEDERATION INCORPORATED

Current Principal Place of Business:

11100 WILDLIFE CENTER DRIVE
RESTON, VA 201905362 US

New Principal Place of Business:

Current Mailing Address:

11100 WILDLIFE CENTER DRIVE
RESTON, VA 201905362 US

New Mailing Address:

FEI Number: 53-0204616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P
Name: SCHWEIGER, LARRY
Address: 11100 WILDLIFE CENTER DRIVE
City-St-Zip: RESTON, VA 201905362 US

Title: COO
Name: MATYAS, JAIME
Address: 11100 WILDLIFE CENTER DRIVE
City-St-Zip: RESTON, VA 201905362 US

Title: A. S
Name: BLESSYN, JULIE
Address: 11100 WILDLIFE CENTER DRIVE
City-St-Zip: RESTON, VA 201905362 US

Title: T
Name: GOMEZ-ZORMELO, DULCE
Address: 11100 WILDLIFE CENTER DRIVE
City-St-Zip: RESTON, VA 201905362 US

Title: A. T
Name: ASHLEY, JOHN
Address: 11100 WILDLIFE CENTER DRIVE
City-St-Zip: RESTON, VA 201905362 US

Title: C
Name: THOMPSON, CRAIG
Address: 11100 WILDLIFE CENTER DRIVE
City-St-Zip: RESTON, VA 201905362 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN ASHLEY

A.T.

04/09/2012

Electronic Signature of Signing Officer or Director

Date