

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000081848 (0)

1. Corporation Name

WILDLIFE PRODUCTIONS, INC.



Principal Place of Business

100 N. TAMPA ST., STE. 3540
TAMPA FL 33602

Mailing Address

100 N. TAMPA ST., STE. 3540
TAMPA FL 33602

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

MORRISON, SUSAN B ESQ.
1200 W. PLATT ST., STE. 100
TAMPA FL 33606

3. Date Incorporated or Qualified
10/25/1995

3a. Date of Last Report

4. FEIN Number

59-3345990

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 198.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above named corporation swears this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Said change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person who is authorized to accept this filing

Signature of person who is authorized to accept this filing

Date

12. OFFICERS AND DIRECTORS

TITLE DPT
NAME WARREN, GRADY
STREET ADDRESS 100 N. TAMPA ST., STE. 3540
CITY-ST-ZIP TAMPA FL 33602

☐ DELETE

TITLE DS
NAME HARRELL, CECIL S
STREET ADDRESS 100 N. TAMPA ST., STE. 3540
CITY-ST-ZIP TAMPA FL 33602

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

R. GAYLE MILLER

100 N. TAMPA ST., SUITE 3540

TAMPA, FL 33602

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

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☐ Change

☐ Addition

☐ Change

☐ Addition

SIGNATURE:

R. GAYLE MILLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/96

(813) 222 1303

CR2E034 (12/95)