

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000072380 (3)**

1. Corporation Name  
**WILD BIRDS & MORE, INC.**

Principal Place of Business  
**3435 SEA MARSH RD.  
FERNANDINA BEACH FL 32034**

Mailing Address  
**3435 SEA MARSH RD.  
FERNANDINA BEACH FL 32034**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/20/1997**

4. FEI Number

**59-3463682**

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 owes or has paid the current year intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business  
21 **1241 S. 8th Street**

Suite, Apt. #, etc.

22 **Suite B**

City & State

23 **Fernandina Bch, Fl**

Zip

24 **32034**

Country

25 **USA**

2a. Mailing Address  
26 **115 Marsh Lakes Dr.**

Suite, Apt. #, etc.

27

City & State

28 **Fernandina Bch, Fl**

Zip

29 **32034**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**SPRAGUE, SUSAN H  
3435 SEA MARSH RD.  
FERNANDINA BEACH FL 32034**

10. Name and Address of New Registered Agent

81 Name

**Marjorie Van Meter**

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

**115 Marsh Lakes Drive**

83

84 City

**Fernandina Beach,**

**FL**

85 Zip Code  
**32034**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

*Marjorie D. Van Meter (Anderson)*

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>SPRAGUE, SUSAN H</b>	
STREET ADDRESS	<b>3435 SEA MARSH RD.</b>	
CITY-ST-ZIP	<b>FERNANDINA BEACH FL 32034</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>METER, MARJORIE D</b>	<b>VAN METER</b>
STREET ADDRESS	<b>115 MARSH LAKES DR.</b>	
CITY-ST-ZIP	<b>FERNANDINA BEACH FL 32034</b>	

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>ANDERSON, SHELDON C</b>	
STREET ADDRESS	<b>115 MARSH LAKES DR.</b>	
CITY-ST-ZIP	<b>FERNANDINA BEACH FL 32034</b>	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Marjorie D. Van Meter*

*3/7/98 and 26. 2425*

CR2E034 (10/97)