

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007 08:00 A
Secretary of State

DOCUMENT # S25397

1. Entity Name
ZOO WORLD, INC.



Principal Place of Business
9008 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32407

Mailing Address
9008 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32407



04092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3092735
Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ISLER, CHARLES S
434 MAGNOLIA AVENUE
PANAMA CITY, FL 32401

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (Signature typed or printed name of registered agent or officer or director) (NOTE: Registered Agent signature required when filing change) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	NOLAND, THOMAS F
STREET ADDRESS	4141 WALL STREET
CITY-STATE-ZIP	MONTGOMERY, AL 36104
TITLE	V
NAME	WILLIAMS, RICHARD E
STREET ADDRESS	2616 E 17TH STREET
CITY-STATE-ZIP	PANAMA CITY, FL 32405
TITLE	P
NAME	BRYD, H.P.
STREET ADDRESS	57 INDIANGRASS LN
CITY-STATE-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000698644
04/19/07-80010-018 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard E. Williams* *Richard E. Williams* 4-9-07 850 230 4839
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #