

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006859

Entity Name: BALLEEN ISLES WILDLIFE FOUNDATION INC

Current Principal Place of Business:

303 BALLEEN ISLES CIRCLE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

303 BALLEEN ISLES CIRCLE
PALM BEACH GARDENS, FL 33418 US

FEI Number: 20-4616511

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WRIGHT, ROBERT
309 SUNSET BAY LANE
PALM BEACH GARDENS, FL 33418 US

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: ROBERT WRIGHT

04/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GUERRA, MARIANNE
Address 113 VINTAGE ISLE LN
City-State-Zip: PALM BEACH GARDENS FL 33418

Title V
Name EDENZON, IRWIN
Address 117 ST EDWARDS PL
City-State-Zip: PALM BEACH GARDENS FL 33418

Title T
Name PASSOV, JODY
Address 117 ORCHID CAY DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title S
Name KLEIN, SYLVANA
Address 117 GRAND PALM WAY
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR, COMPLIANCE
Name WRIGHT, ROBERT THOMAS
Address 309 SUNSET BAY LANE
City-State-Zip: PALM BEACH GARDENS FL 33418

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: ROBERT T WRIGHT

DIRECTOR, COMPLIANCE 04/13/2017

Electronic Signature of Signing Officer/Director Detail

Date