

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000003727

**Entity Name:** ROYAL RESCUE & WILDLIFE SANCTUARY, INC.**Current Principal Place of Business:**315 PINTO LANE  
PALM BAY, FL 32329**Current Mailing Address:**315 PINTO LANE  
PALM BAY, FL 32329 US**FEI Number:** 47-4450235**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TELANDER, DIANE  
315 PINTO LANE  
PALM BAY, FL 32329 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title            PRESIDENT, SECRETARY, DIRECTOR  
Name            TELANDER, DIANE  
Address        315 PINTO LANE  
City-State-Zip: PALM BAY FL 32329

Title            D, VP  
Name            WENGER, MANFRED  
Address        315 PINTO LANE  
City-State-Zip: PALM BAY FL 32329

Title            TREASURER  
Name            CAMPBELL, KIMBERLY  
Address        3015 HACKENSACK AVENUE SE  
City-State-Zip: PALM BAY FL 32909

Title            S  
Name            TELANDER, DIANE  
Address        315 PINTO LANE  
City-State-Zip: PALM BAY FL 32329

Title            DIRECTOR  
Name            PRUS, AMELIA A  
Address        22W644 POPLAR  
City-State-Zip: GLEN ELLYN IL 60137

*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:** DIANE TELANDER**PRESIDENT****01/25/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date