

**2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N23000008840

Entity Name: LION COUNTRY SAFARI CONSERVATION & EDUCATION
FOUNDATION, INC.

Current Principal Place of Business:

2003 LION COUNTRY SAFARI RD
LOXAHATCHEE, FL 33470

Current Mailing Address:

2003 LION COUNTRY SAFARI RD
LOXAHATCHEE, FL 33470 US

FEI Number: 93-2615088

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, ELI
2003 LION COUNTRY SAFARI RD
LOXAHATCHEE, FL 33470 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 SECRETARY
Name BERTHIAUME, JENNIFER
Address 2003 LION COUNTRY SAFARI RD
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR
Name DRYER, EMILY
Address 2003 LION COUNTRY SAFARI RD
City-State-Zip: LOXAHATCHEE FL 33470

Title TREASURER
Name PERRY, AMY
Address 2003 LION COUNTRY SAFARI RD
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR
Name KOPPEL, CHARLES
Address 2003 LION COUNTRY SAFARI RD
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR
Name WILSON, ELI
Address 2003 LION COUNTRY SAFARI RD
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR
Name HAMMOND, BETH
Address 2003 LION COUNTRY SAFARI RD
City-State-Zip: LOXAHATCHEE FL 33470

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: ELI WILSON

DIRECTOR

05/12/2025

Electronic Signature of Signing Officer/Director Detail

Date