

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004115

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** SAFARI TODD WILDLIFE PRODUCTIONS, INC.

**Current Principal Place of Business:**

26205 E. COLONIAL DRIVE  
CHRISTMAS, FL 32709

**New Principal Place of Business:**

**Current Mailing Address:**

4983 BROOK ROAD  
KISSIMMEE, FL 34758

**New Mailing Address:**

**FEI Number:** 03-0448912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HAWKSWORTH, LYNNE  
4983 BROOK ROAD  
KISSIMMEE, FL 34758 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PVPS  
**Name:** DREVER, DAWN  
**Address:** 461 AMERICANA BLVD NW  
**City-St-Zip:** PALM BAY, FL 32907

**Title:** DT  
**Name:** HAWKSWORTH, LYNNE  
**Address:** 4983 BROOK ROAD  
**City-St-Zip:** KISSIMMEE, FL 34758

**Title:** S  
**Name:** LASHBROOK, RAMONA  
**Address:** 1105 OLD DIXIE HWY  
**City-St-Zip:** TITUSVILLE, FL 32796

**Title:** VP  
**Name:** KAGAN, JACOB  
**Address:** 455 TIMBER RIDGE DR  
**City-St-Zip:** LONGWOOD, FL 32779

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:** LYNNE HAWKSWORTH

DT

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date