

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N02000004115

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

**Current Principal Place of Business:**

26205 E. COLONIAL DRIVE  
CHRISTMAS, FL 32709

**Current Mailing Address:**

26205 E COLONIAL DRIVE  
CHRISTMAS, FL 32709 US

**FEI Number:** 03-0448912

**Certificate of Status Desired:** No

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

DREVER, DAWN  
26205 E. COLONIAL DRIVE  
CHRISTMAS, FL 32709 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:** DAWN M DREVER

10/20/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title PT  
Name LASHBROOK, RAMONA  
Address 1105 OLD DIXIE HWY  
City-State-Zip: TITUSVILLE FL 32796

Title SECRETARY  
Name DREVER, DAWN  
Address 1617 KEMBERLTY AVE  
City-State-Zip: TITUSVILLE FL 32796

Title DIRECTOR  
Name GREENE, JAMES R  
Address 6050 EDISON ST  
City-State-Zip: COCOA FL 32927

Title DIRECTOR  
Name BROWN, RYAN P  
Address 1617 KEMBERLY AVE  
City-State-Zip: TITUSVILLE FL 32796

*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:** RAMONA LASHBROOK

PT

10/20/2016

Electronic Signature of Signing Officer/Director Detail

Date