# 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.

PRESIDENT

#### SIGNATURE: RAMONA LASHBROOK

Electronic Signature of Signing Officer/Director Detail

## DOCUMENT# N0200004115

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

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### 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

#### 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			05/01/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title \	/P	Title	PT	
Name k	KAGAN, JACOB	Name	LASHBROOK, RAMONA	
Address 4	455 TIMBER RIDGE DR	Address	1105 OLD DIXIE HWY	
City-State-Zip: L	LONGWOOD FL 32779	City-State-Zip:	TITUSVILLE FL 32796	
Title S	SECRETARY	Title	DIRECTOR	
Name D	DREVER, DAWN	Name	GREENE, JAMES R	
Address 1	1617 KEMBERLTY AVE	Address	6050 EDISON ST	
City-State-Zip: T	TITUSVILLE FL 32796	City-State-Zip:	COCOA FL 32927	
Title D	DIRECTOR			
Name E	BROWN, RYAN P			
Address 1	1617 KEMBERLY AVE			
City-State-Zip: 7	TITUSVILLE FL 32796			

Certificate of Status Desired: No

FILED May 01, 2019 Secretary of State 2681522398CC

> 05/01/2019 Date