2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# 705106

Entity Name: PEGGY ADAMS ANIMAL RESCUE LEAGUE OF THE PALM BEACHES, INCORPORATED

Current Principal Place of Business:

3200 NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

3200 NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 59-0637811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEVERIDGE, CARL ED
3200 N. MILITARY TRAIL
WEST PALM BEACH, FL 33409 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: D ( ) Delete
Name: MEYER, WILLIAM, MRS. J D
Address: 757 FAIRHAVEN DR
City-St-Zip: N PALM BCH, FL 00000, FL 33408 US

Title: VC ( ) Delete
Name: AUSLANDER, LOUIS, MR. VC
Address: 61 ST. JAMES DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: CD ( ) Delete
Name: DAVIS, MRS. CHARLES E CD
Address: 3700 JOSEPH DR
City-St-Zip: WEST PALM BCH, FL, FL 33417 US

Title: P ( ) Delete
Name: GRACE, MRS. ROBERT M P
Address: 126 SEARGRAPE CR.
City-St-Zip: PALM BEACH, FL 33480 US

Title: D ( ) Delete
Name: BROUGHER, MRS. W. DALE D
Address: 400 S. OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480 US

Title: TD ( ) Delete
Name: BAYLEY, JOHN L TD
Address: 163 ROUND HILL ROAD
City-St-Zip: SAPPHIRE, NC 28774 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change ( ) Addition
Name: AUSLANDER, LOUIS, MR. CD
Address: 61 ST. JAMES DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VC (X) Change ( ) Addition
Name: THIBADEAU, PAUL, MR. VC
Address: 129 RIVER ROAD
City-St-Zip: JUPITER, FL 33458 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARL LEVERIDGE ED 04/20/2005

Electronic Signature of Signing Officer or Director — Date