

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705106

FILED
Jan 11, 2007
Secretary of State

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 ()

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: ED () Delete
Name: LEVERIDGE, CARL, MR. ED
Address: 106 SEDONA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: CD () Delete
Name: AUSLANDER, LOUIS, MR. CD
Address: 103 GRAND PALM WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VC () Delete
Name: THIBADEAU, PAUL, MR. VC
Address: 129 RIVER ROAD
City-St-Zip: JUPITER, FL 33458 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: HUNT, SAM TD
Address: 161 VIA PALMA
City-St-Zip: PALM BEACH, FL 33480 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: LEVERIDGE, CARL, MR. ED
Address: 1109 VINTNER BLVD.
City-St-Zip: PALM BEACH GARDENS, FL 33410 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:

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 Chapter 119, 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

01/11/2007

Electronic Signature of Signing Officer or Director

_____ Date