FILED

Secretary of State

02-26-1999 90023 010 ****61.25

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 735698

SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS OF HERNANDO COUNTY, INC.

Principal Place of Business Mailing Address				•		
9075 GRANT ST PO BOX 3161 P.O.BOX 3161 P.O.BOX 3161 P.O.BOX 3161 P.O.BOX 3161 US US US US						
Principal Place of Business 2a. Mailing Address					Date Incorporated or Qualifed	
21 9075	15 GRANT 5T. 26				04/30/1976	
Suite, Apt.					4. FEI Number	Applied For
22		27			59-2911261	Not Applicable
City & State City & State					5. Certificate of Status Desired	\$8.75 Additional
23 BROOK SUILLE FL. 28 Zip Country Zip Cou					or conticute of cause points	Fee Required
		Zip	Country		6. Election Campaign Financing	\$5.00 May Be
24 346	13 25 U.S.	29 30			Trust Fund Contribution	Added to Fees
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
			81	Name		
LAW OFFICES OF H. CURTIS SKIPPER				Street Addre	ess (P.O. Box Number is Not Acceptable)	12 9 2 4 7 5 18 1
1366 PINEHURST DR.HERNANDO W.PLAZA						the state of the
SPRINGHILL FL 34606					ាំគឺ ស្លាក់ ដែ ល់ ដែល	Delata Pertailer
				City		85 Zip Code
1					Fl	<u> </u>
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE	V	PIO	Change
NAME	SMITH, DORIS C		1.2 NAME	31	MITH DORIS C	
STREET ADDRESS	7226 SPRING HILL DR.		1.3 STREET	ADDRESS 7.	226 SPRING HILL D	
CITY-ST-ZIP	SPRING HILL FL		1.4 CITY-51	اک T-ZIP	SPRING HILL FL.	34608
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change 🔀 Addition
NAME	HANDLE, GLORIA A		2.2 NAME		PTUNATO LOIS	
STREET ADORESS	2152 DANFORTH RD.		2.3 STREET	ADDRESS 3	175 MILL ALE	
CITY-ST-ZIP	SPRING HILL FL		2.4 CITY-S	iT-ZIP 5.	PRING HILL, FL	34608
TITLE	P	DELETE	3.1 TITLE	1 0		Change Addition
NAME	CRAVEN, ALICIA		3.2 NAME	a.	PAVEN ALICIA	
STREET ADDRESS			3.3 STREET	ADDRESS /7	O AUSTIN AVE	
CITY-ST-ZIP	SPRING HILL FL		3.4. CITY-S	T-ZIP 51	PRING HILL FL.	
TITLE	TV	™ DELETE	4.1 TITLE	D		Change Addition
NAME	GUTKNECHT, EARL A		4. 2 NAME	KE	EISTER CAROLYN	
STREET ADDRESS			4.3 STREET	ADDRESS //	1/23 SKEFFIELD RD.	
CITY OF ZID	CODING UILL EI		AACTV C		PRINC HILL FL.	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

RADO, JENNIFER

9551 PURDY ST

LEONARD, LINDA

BROOKSVILLE FL

12140 SUNSHINE GR

SPRING HILL FL 34608

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

⊠ DELETE

⊠ DELETE

352 686 1118

Change

34608

☐ Addition

☐ Addition

PID DENNIFER

9551 PURDY ST

SPRING HILL,

SPRING HILL

STENECHT EARL A

8376 BLACKSTONE