2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT #763275** 05-31-2005 90009 032 ****70.00 HUMANE SOCIETY/SPCA OF SUMTER COUNTY, INC. Principal Place of Business Mailing Address 138 BLEHNELL FLAZA POBOX253 BUS-NELL, FL 33513 **SJTE 104** BL8+NELL RL 33513 2. Principal Place of Business 3. Mailing Address 994 CR 529A P. O. BOX 67 Suite, Apt. #, etc. Suite, Apt. #, etc. 05232005 Chg-NP CR2E037 (10/03) 4. FEI Number Applied For City & State City & State LK. PANASOFFKEE, FL 59-2999283 LK, PANASOFFKEE Not Applicable Zip Country Zip Country \$8.75 Additional X 5. Certificate of Status Desired 33538 33538 U.S. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOGAN, JUDITH T Street Address (P.O. Box Number is Not Acceptable) 4794 CR 300 LAKE PANASOFFKEE, FL 33538 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. JUDITH T. HOGAN, TREASURER draw. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by September 7, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DC Delete TITLE Addition TITLE ☐ Change LATHAM, LINDA 1874 SE 44# PL. GRAVES, LINDA NAME NAME STREET ADDRESS **11927 SW 31ST TERRACE** STREET ADDRESS WEBSTER, FL 33597 CITY-ST-7IP CITY-ST-ZIP BUSHNELL, FL 335/3 D TITLE Delete TITLE ☐ Change **Addition** SLIPPEY, SUZANNE NAME NAME MAJOR, MARION 2063 CR 439A STREET ADDRESS 10129A SE 22ND PATH STREET ADDRESS CITY-ST-ZIP WEBSTER, FL 33597 CITY-ST-ZIP LAKE PANASOFFKEE, FL D TITLE Delete TITI F SHOUP, LUCY EVANS, SHERI 1400 SE 70TH AVE. STREET ADDRESS 3901 COUNTY ROAD 511-A STREET ADDRESS BUSHNELL, FL 33513 CITY-ST-ZIP WILDWOOD, FL 34785 CITY-ST-ZIP DT TITLE Delete TITLE ☑ Change ☐ Addition DCT HOGAN, JUDITH T NAME NAME HOGAN, JUDITH T. 4794 CR 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE PANASOFFKEE, FL 33538 CITY-ST-ZIP LAKE PANASOFFKEE, FL 33538 TITLE ☐ Delete Change Addition TITLE SANDI VAUGHAN, SANDI 1682 NW ST. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP BUSHNELL, FL TITLE Change ☐ Addition □ Delete TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

12. 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 report or supplemental 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 10 or Block 11 if

JUDITH T. HOGAN 5-23-05

changed, or on an attachment with an address, with all other like empowered.

judith S. Hogan

FILED

May 31, 2005 8:00 am