2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2008 8:00 am
Secretary of State
05-08-2008 90013 041 ****70.00

DOCUMENT # 763275

1. Entity Name

HUMANE SOCIETY/SPCA OF SUMTER COUNTY, INC.

Principal Place of Business	Mailing Address
994 CR 529A LAKE PANASOFFKEE FL 33538 US	PO BOX 67 LAKE PANASOFFKEE FL 33538

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2999283 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOGAN, JUDITH T 4794 CR 300 LAKE PANASOFFKEE FL 33538	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHILES, MARY 3159 WILLIAMS RD LADY LAKE FL 32162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/T MARY CHILES	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS BATCHELDER, ANNE 4272 S. US HWY 301, #240 BUSHNELL FL 33513	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FUSCO, LUCILLE 748 SANTA FE ST. THE VILLAGES FL 32162	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TRISH CHESTON	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARTMAN, DIANE 7390 SE 173RD ARLINGTON LOOP THE VILLAGES FL 32162	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC LINDA GRAVES	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC EVANS, SHERI 1400 SE 70TH AVE BUSHNELL FL 33513	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHERI EVANS	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEIDEL, CINDY 17176 SE 93RD YONDEL CIRCLE LADY LAKE FL 32162	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JUDITH HOGAN	☑ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Chiles 4/2/08 352-205-822