

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006290

FILED
Jun 24, 2009
Secretary of State

Entity Name: THE HUMANE SOCIETY OF THE UNITED STATES INC.

Current Principal Place of Business:

2100 L STREET NW
WASHINGTON, DC 20037 US

New Principal Place of Business:

Current Mailing Address:

2100 L STREET NW
WASHINGTON, DC 20037 US

New Mailing Address:

FEI Number: 53-0225390 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: P () Delete
Name: PACELLE, WAYNE
Address: 2100 L STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

Title: T () Delete
Name: WAITE, G. THOMAS
Address: 2100 L STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

Title: AT () Delete
Name: BERGE, MARY K
Address: 2100 L STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

Title: VGC () Delete
Name: KINDLER, ROGER A
Address: 2100 L STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

Title: S () Delete
Name: FRAKE, JANET
Address: 2100 L STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

Title: AS () Delete
Name: GATONS, PATRICIA A
Address: 2100 L STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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 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: MARY K BERGE

AT

06/24/2009

Electronic Signature of Signing Officer or Director

Date