2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2009
Secretary of State

DOCUMENT# N00000003918

Entity Name: AMERICAN ANIMAL HUSBANDRY COALITION, INC.

Current Principal Place of Business:

213 CLIFTON ROAD
CRESCENT CITY, FL 32112 US

New Principal Place of Business:

Current Mailing Address:

213 CLIFTON ROAD
CRESCENT CITY, FL 32112 US

New Mailing Address:

FEI Number: 65-1040379 **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:

RIERA-GOMEZ, ORLANDO
213 CLIFTON ROAD
CRESCENT CITY, FL 32112 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: PD ( ) Delete
Name: CRAWFORD, NEAL
Address: 3828 BEALL PACKING RD
City-St-Zip: BONIFAY, FL 32425

Title: VD ( ) Delete
Name: RIERA-GOMEZ, ORLANDO
Address: 213 CLIFTON ROAD
City-St-Zip: CRESCENT CITY, FL 32112

Title: TD ( ) Delete
Name: RIERA-GOMEZ, JANET
Address: 213 CLIFTON ROAD
City-St-Zip: CRESCENT CITY, FL 32112

Title: SD (X) Delete
Name: CRAWFORD, CARMELETTA
Address: 3828 BEAL PACKING RD
City-St-Zip: BONIFAY, FL 32425

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RIERA-GOMEZ, ORLANDO
Address: 213 CLIFTON ROAD
City-St-Zip: CRESCENT CITY, FL 32112 US

Title: VD (X) Change ( ) Addition
Name: CRAWFORD, NEAL
Address: 3828 BEALL PACKING ROAD
City-St-Zip: BONIFAY, FL 32425 US

Title: STD (X) Change ( ) Addition
Name: RIERA-GOMEZ, JANET
Address: 213 CLIFTON ROAD
City-St-Zip: CRESCENT CITY, FL 32112

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: JANET RIERA-GOMEZ STD 05/29/2009
Electronic Signature of Signing Officer or Director — Date