2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

CITY-ST-78

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Feb 17, 2004 8:00 am Secretary of State DOCUMENT # N01000003423 02-17-2004 90049 044 ****61.25 STAND UP FOR ANIMALS, INC. Principal Place of Business Mailing Address 29162 IRIS DRIVE BIG PINE KEY FL 33043 29162 IRIS DRIVE BIG PINE KEY FL 33043 are surely surely a 3. Mailing Address 2. Principal Place of Business same 10 65C Suite, Apt. #, etc Suite, Apt. #, etc. MOORE CR2E037 (11/03) 11 aratt City & State 4. FEI Number City & State Applied For 65-1134062 Not Applicable Zσ Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 60 Herald **GOTTWALD, LINDA** Street Address (P.O. Box Number is Not Acceptable) 29162 IRIS DRIVE **BIG PINE KEY FL 33043** 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 Signature, typed or printed name of regis (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution Added to Fees Due By May 1, 2004 Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Chance Addition GOTTWALD, LINDA NAME NAME 29162 IRIS DR. STREET ADDRESS STREET ADDRESS BIG PINE KEY FL 33404 CiTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition JORDAN, VERONICA NAME NAME PO BOX 1911 STREET ADDRESS STREET ADDRESS **DAVIS CA 95617** CITY-ST-ZIP CITY-ST-ZIP IIII.E Delete TITLE Change ☐ Addition HIRSCH, LARRY NAME NAME 8 HUGH STREET STREET ADDRESS STREET ADDRESS WESTERLY RI 02891 CITY-ST-ZIF CITY-SI-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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