

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000003423

1. Entity Name  
STAND UP FOR ANIMALS, INC.



**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

01-31-2003 90128 044 \*\*\*\*61.25  
04-28-2003 91844 041 \*\*\*\*61.25

Principal Place of Business  
29162 IRIS DRIVE  
BIG PINE KEY FL 33043

Mailing Address  
29162 IRIS DRIVE  
BIG PINE KEY FL 33043

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1134062

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOTTWALD, LINDA  
29162 IRIS DRIVE  
BIG PINE KEY FL 33043

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 PD  
NAME GOTTWALD, LINDA  
STREET ADDRESS 29162 IRIS DR.  
CITY-ST-ZIP BIG PINE KEY FL 33040 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD  
NAME MORETTI, RICHARD  
STREET ADDRESS 2390 OVERSEAS HWY.  
CITY-ST-ZIP MARATHON FL 33042 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
NAME JORDAN, VERONICA  
STREET ADDRESS PO BOX 1911  
CITY-ST-ZIP DAVIS CA 95617 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE YPD  
NAME Larry Hirsch  
STREET ADDRESS 8 High Street  
CITY-ST-ZIP Westerly, R.I. 02891 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE: Linda Gottwald

Secretary of State  
Sent to PD 1/17/03

CR2E037 (10/02)