

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010906

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: PHOENIX ANIMAL RESCUE, INC.

**Current Principal Place of Business:**

12329 NW 10TH PLACE  
NEWBERRY, FL 32669

**New Principal Place of Business:**

**Current Mailing Address:**

12329 NW 10TH PLACE  
NEWBERRY, FL 32669

**New Mailing Address:**

FEI Number: 20-0958497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DUNLAP, MICHELLE P  
23421 NW COUNTY ROAD 1493  
ALACHUA, FL 32615 US

**Name and Address of New Registered Agent:**

DUNLAP, MICHELLE P  
12329 NW 10TH PLACE  
NEWBERRY, FL 32669 US

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:

04/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P,S ( ) Delete  
Name: DUNLAP, MICHELLE  
Address: 23421 NW COUNTY ROAD 1493  
City-St-Zip: ALACHUA, FL 32615 US

Title: VP ( ) Delete  
Name: DUNLAP, PAMELA  
Address: 12329 NW 10TH PLACE  
City-St-Zip: NEWBERRY, FL 32669 US

Title: T ( ) Delete  
Name: SEBREE, PAM  
Address: 23421 NW COUNTY ROAD 1493  
City-St-Zip: ALACHUA, FL 32615 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DUNLAP, MICHELLE  
Address: 12329 NW 10TH PLACE  
City-St-Zip: NEWBERRY, FL 32669 US

Title: S (X) Change ( ) Addition  
Name: DUNLAP, PAMELA  
Address: 12329 NW 10TH PLACE  
City-St-Zip: NEWBERRY, FL 32669 US

Title: T (X) Change ( ) Addition  
Name: TATE, AMY  
Address: 12329 NW 10TH PLACE  
City-St-Zip: NEWBERRY, FL 32669 US

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: MICHELLE DUNLAP

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date