## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000002431

FILED Sep 02, 2008 Secretary of State

Entity Name: CRONE'S CREATURE GREYHOUND ADOPTIONS, INC.

**New Principal Place of Business: Current Principal Place of Business:** 4540 SW 166TH CT. RD. OCALA, FL 34481 **Current Mailing Address: New Mailing Address:** 4540 SW 166TH CT. RD. OCALA, FL 34481 FEI Number: 20-8628315 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: CRAFTS, TONY COMPTON, KATHRYN A CEO 184 NADÍA MICHELLE CT. 4540 SW 166TH COURT ROAD OCALA, FL 34481 JACKSONVILLE, FL 32225 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: KATHRYN A COMPTON 09/02/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DCEO () Change () Addition () Delete COMPTON, KAY Name: Name: 4540 SW 166TH CT. RD. Address: Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: Title: VD Title: VD (X) Change ( ) Addition () Delete Name: POE, CHARM Name: ANDERSON, MISTY Address: 3660 W. COGWOOD CIR. Address: 9755 SW 105TH STREET City-St-Zip: BEVERLY HILLS, FL 34465 City-St-Zip: OCALA, FL 34477 Title: () Delete Title: () Change () Addition FITTERMAN, SHEARA Name: Name: 301 S. SEMINOLE AVE Address: Address: City-St-Zip: INVERNESS, FL 34451 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: DIXON, JOANN Name: 3569 SW 49TH TERR. Address: Address: City-St-Zip: OCALA, FL 34474 City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition LAURA, PENNINGTON Name: Name: 1813 CREEKWOOD RUN Address: Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33809

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: KATHRYN A COMPTON DCEO 09/02/2008