

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2000 8:00 am
Secretary of State
 02-07-2000 90018 002 ****70.00

DOCUMENT # N39436

1. Entity Name

SET FREE RESCUE MISSION, INC.

Principal Place of Business

1825 30TH AVE. W.
 BRADENTON FL 34205

Mailing Address

501 VILLAGE GREEN PKWY
 BRADENTON FL 34209-3401

2. Principal Place of Business

501 VILLAGE GREEN PKWY

3. Mailing Address

501 VILLAGE GREEN PKWY

Suite, Apt. #, etc.

7

Suite, Apt. #, etc.

7

City & State

BRADENTON, FLORIDA

City & State

BRADENTON FL

Zip

34209

Country

MANATEE

Zip

34209

Country

MANATEE

4. FEI Number

65-0216564

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

XAVIER, ROBERT F.
8113 18TH AVENUE EAST
PALMETTO FL 34221

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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.

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE **P/D** ☐ Delete
 NAME **XAVIER, ROBERT F.**
 STREET ADDRESS **8113 18TH AVE. EAST**
 CITY-ST-ZIP **PALMETTO FL**

TITLE **M/D** ☐ Delete
 NAME **BAKER, MIKE**
 STREET ADDRESS **348 52ND STREET WEST**
 CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **ST** ☒ Delete
 NAME **WILLARD, PATSY R.**
 STREET ADDRESS **1825 30 AVE WEST**
 CITY-ST-ZIP **BRADENTON FL**

TITLE **V/D** ☐ Delete
 NAME **ERICKSON, RICHARD E.**
 STREET ADDRESS **5611 40TH AVE. EAST**
 CITY-ST-ZIP **BRADENTON FL**

TITLE **S/D** ☐ Delete
 NAME **ENNIS, GENE**
 STREET ADDRESS **1505 WILLOW OAK CIRCLE**
 CITY-ST-ZIP **BRADENTON FL**

TITLE **T/D** ☐ Delete
 NAME **BETTY XAVIER**
 STREET ADDRESS **8113 18TH AVE EAST**
 CITY-ST-ZIP **PALMETTO, FL 34221**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **M/D** ☒ Change ☐ Addition
 NAME **EXECUTIVE DIRECTOR MIKE BAKER**
 STREET ADDRESS **348-52ND STREET WEST**
 CITY-ST-ZIP **PALMETTO FL 34221**

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP **(GMS)**

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

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

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

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: **Robert F. Xavier, President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/15/2000

(941) 795-5575

Date

Daytime Phone #

CR2E037 (9/99)