

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753518

FILED
Jan 19, 2006
Secretary of State

Entity Name: HUMANE SOCIETY OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business:

SAVANNAH ROAD
100 SAVANNAH ROAD
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

SAVANNAH ROAD
PO BOX 3661
FORT PIERCE, FL 349483661

New Mailing Address:

FEI Number: 59-0836088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ANNETTE
2015 31ST AVE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

PARRY, JOHN
2203 SO. INDIAN RIVER DRIVE
FORT PIERCE, FL 34950 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: JOHN PARRY 01/19/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: 1VPD () Delete
Name: DUNNING, PATRICIA
Address: 3172 SE OVERBROOK DR
City-St-Zip: PORT ST LUCIE,, FL 34952

Title: PD () Delete
Name: CLANCY, PRISCILLA
Address: 2307 CANOE CREEK LANE
City-St-Zip: FORT PIERCE, FL 34981

Title: TD () Delete
Name: MILLER, ANNETTE
Address: 2015 31ST AVE
City-St-Zip: VERO BEACH, FL 32960

Title: RSD () Delete
Name: LANDERS, PAMELA
Address: 3819 ST MARKS ROAD
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: PARRY, JOHN
Address: 2203 SO INDIAN RIVER DR
City-St-Zip: FORT PIERCE, FL 34950

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN PARRY TD 01/19/2006

Electronic Signature of Signing Officer or Director Date