

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004209

FILED
Feb 17, 2006
Secretary of State

Entity Name: FLORIDA COCKER SPANIEL RESCUE, INC.

Current Principal Place of Business:

LOVE ON PAWS
4635 LAND O' LAKES BLVD.
LAND O' LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

FCSR
4726 69TH COURT EAST
PALMETTO, FL 34421

New Mailing Address:

FCSR
27117 HICKORY HILL RD
BROOKSVILLE, FL 34602

FEI Number: 59-3581852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANSLER, CAROL
27117 HICKORY HILL RD
BROOKSVILLE, FL 34602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CANSLER, CAROL
Address: 27117 HICKORY HILL RD
City-St-Zip: BROOKSVILLE, FL 346028290

Title: DVP () Delete
Name: RICHARDSON, TIM
Address: 4726 69TH COURT EAST
City-St-Zip: PALMETTO, FL 34221

Title: TS () Delete
Name: RICHARDSON, DONNA
Address: 4726 69TH COURT EAST
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: RICHARDSON, TIM
Address: 4528 HOLLY TREE LN
City-St-Zip: MORRISTOWN, TN 37814

Title: TS (X) Change () Addition
Name: RICHARDSON, DONNA
Address: 4528 HOLLY TREE LN
City-St-Zip: MORRISTOWN, TN 37814

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: DONNA RICHARDSON

TS

02/17/2006

Electronic Signature of Signing Officer or Director

_____ Date