

AMENDED
NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)


08-2T-2008 90001 021 ***61.25
763212

FILED

08 AUG 25 PM 3:07

CLERK OF STATE
TALLAHASSEE, FLORIDA

CR2E037B (8/05)

DOCUMENT # 763212			
1. Entity Name Volunteer Services for Animals Inc			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 3334 Balboa Cir W Suite, Apt. #, etc.		Mailing Address 6017 Pine Ridge Rd Suite, Apt. #, etc. #330	
City & State Naples, FL Zip 34105 Country USA		City & State Naples, FL Zip 34119 Country USA	
4. FEI Number 592197365		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE		7. Name and Address of Current Registered Agent	
		Name Ruth Stirling	
		Street Address 2434 Golden Gate Blvd W Box Number is Not Applicable	
		City Naples State FL Zip Code 34120	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Resigned / new Agent Phyllis Estes		Phyllis Estes 8-1508	
FEE IS \$61.25 Initial or Amended AR		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE PD NAME Phyllis Estes STREET ADDRESS 3334 Balboa Cir W CITY-ST-ZIP Naples, FL 34105		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE SD NAME Christina Sprak STREET ADDRESS 10795 Fieldair dr. CITY-ST-ZIP Naples, FL 34119		TITLE NAME STREET ADDRESS CITY-ST-ZIP 8/25	
TITLE D NAME Christine Avery STREET ADDRESS 9002 Rocky Bank dr. CITY-ST-ZIP Naples, FL 34109		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE TD NAME KATHI MATSSON STREET ADDRESS 27401 Hacienda E. 218A CITY-ST-ZIP Bonita SD, FL 34135		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE D NAME Angela Fieger STREET ADDRESS 4013 Treadwater Ct. CITY-ST-ZIP Naples, FL 34109		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE D NAME Michele Antonio STREET ADDRESS 7620 Rookery Ln CITY-ST-ZIP Naples, FL 34120		TITLE 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 on an attachment with an address, with all other like empowered.			
SIGNATURE: Kathi M. Mattsson		8-1508 8239-597-8165	