

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753518

FILED
Jan 17, 2011
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:

DAVIS, ROBERT
382 SE NARANJA AVE
PORT ST LUCIE, FL 34983 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: TVP
Name: DAVIS, ROBERT
Address: 382 SE NARANJA AVE
City-St-Zip: PORT ST LUCIE,, FL 34983

Title: PD
Name: CLANCY, PRISCILLA
Address: 4319 GATOR TRACE DR
City-St-Zip: FORT PIERCE, FL 34982

Title: PD
Name: FRISCHKORN, CARROL
Address: 1651 BINNEY DR
City-St-Zip: FORT PIERCE, FL 34949

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

Title: P
Name: MILLER, ANNETTE
Address: 2015 31ST AVE
City-St-Zip: VERO BEACH, FL 32960

I hereby 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 all other like empowered.

SIGNATURE: VIRGINIA JORDAN

CFO

01/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date