#### MONTANTE, PAUL Name Address W BROOK L 34667 City-State-2 Title Y Name

	JUDGE, LISA	Name	MONTANTE,
	PO BOX 5058	Address	7910 WILLOW
-Zip:	HUDSON FL 34674	City-State-Zip:	HUDSON FL
	PRESIDENT	Title	SECRETARY
	BAINUM, LORI	Name	MIKKOLA, RA
		A . I. I	

Name	DAINOW, LONI	Name	
Address	P.O. BOX 545	Address	13493 TROLLMAN ST
City-State-Zip:	BROOKSVILLE FL 34605	City-State-Zip:	SPRING HILL FL 34609
Title	DIRECTOR	Title	TREASURER
Name	TONER, SCOTT	Name	REEVES, TERI
Address	5367 SPRING HILL DRIVE	Address	4272 ROWAN ROAD
City-State-Zip:	SPRING HILL FL 34606	City-State-Zip:	BROOKSVILLE FL 34604

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.

VP

### SIGNATURE: LISA JUDGE

Electronic Signature of Signing Officer/Director Detail

#### 2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 709921** 

Entity Name: THE HUMANE SOCIETY OF THE NATURE COAST, INC.

## **Current Principal Place of Business:**

7200 MOBLEY RD. BROOKSVILLE, FL 34601

## **Current Mailing Address:**

P.O. BOX 10328 BROOKSVILLE,, FL 34603

# FEI Number: 59-1094757

SIGNATURE: PAUL MONTANTE

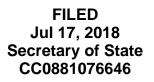
#### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MONTANTE, PAUL 7910 WILLOW BROOK HUDSON, FL 34667 US

**Officer/Director Detail :** VP

Title



07/17/2018 Date

Certificate of Status Desired: Yes

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.

Title

DIRECTOR