

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753518

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

Current Principal Place of Business:

HUMANE SOCIETY OF ST LUCIE CO
8890 NW GLADES CUT-OFF RD.
PORT ST. LUCIE, FL 34986

Current Mailing Address:

HUMANE SOCIETY OF ST LUCIE CO
PO BOX 14199
FORT PIERCE, FL 34979 US

FEI Number: 59-0836088

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, ROBERT
382 SE NARANJA AVE
PORT ST LUCIE, FL 34983 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	ALLEN, SANDRA
Address	1900 TROWBRIDGE ROAD
City-State-Zip:	FORT PIERCE FL 34945
Title	PRESIDENT
Name	NAVARETTA, STEPHEN
Address	7309 RESERVE CREEK DRIVE
City-State-Zip:	PORT ST. LUCIE FL 34986

Title	SECRETARY
Name	FERRARA, JOANNE
Address	712 SE THANKSGIVING AVENUE
City-State-Zip:	PORT ST. LUCIE FL 34984
Title	TREASURER
Name	DAVIS, ROBERT A
Address	382 SE NARANJA AVE
City-State-Zip:	PORT ST LUCIE, FL 34983

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: ROBERT DAVIS

TRESURER

01/10/2015

Electronic Signature of Signing Officer/Director Detail

Date