

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763212

**Entity Name:** VOLUNTEER SERVICES FOR ANIMALS, INC.

**Current Principal Place of Business:**

3334 BALBOA CIR W  
NAPLES, FL 34105

**Current Mailing Address:**

6017 PINE RIDGE RD  
#330  
NAPLES, FL 34119

**FEI Number:** 59-2197365

**Certificate of Status Desired:** No

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

ESTES, PHYLLIS PD  
3334 BALBOA CIR W  
NAPLES, FL 34105 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:** PHYLLIS ESTES

03/16/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name ESTES, PHYLLIS J  
Address 3334 BALBOA CIR W  
City-State-Zip: NAPLES FL 34105

Title VPD  
Name AVERY, CHRISTINE  
Address 9802 ROCKY BANK DRIVE  
City-State-Zip: NAPLES FL 34109

Title TD  
Name GAFFNEY, AMY E  
Address 2461 PINWOODS CIR  
City-State-Zip: NAPLES FL 34105

Title SD  
Name FIEGER, ANGELA  
Address 1075 28TH AVE N  
City-State-Zip: NAPLES FL 34103

Title VPD  
Name LAMB, YVONNE  
Address 28582 ALESSANDRIA CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name CHETKOWSKI, JANE DR.  
Address 1828 SANTA BARBARA BLVD.  
City-State-Zip: NAPLES FL 34116

Title DIRECTOR  
Name GORDON, MENDY  
Address 6462 BIRCHWOOD COURT  
City-State-Zip: NAPLES FL 34109

*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:** PHYLLIS ESTES

PRESIDENT

03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date