

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008857

Entity Name: BRATPACK RESCUE, INC.**Current Principal Place of Business:**36951 E. ELDORADO LAKE DRIVE
EUSTIS, FL 32736**Current Mailing Address:**36951 E. ELDORADO LAKE DRIVE
EUSTIS, FL 32736 US**FEI Number: 52-2413464****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LENTINI, MARILYN
36951 E. ELDORADO LAKE DRIVE
EUSTIS, FL 32736 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	SEC
Name	SCHILLER, KAREN
Address	1504 CASCADE DRIVE #1
City-State-Zip:	STEAMBOAT SPRINGS CO 80487

Title	PRESIDENT
Name	RILEY, STEPHEN T
Address	36949 E. ELDORADO LAKE DRIVE
City-State-Zip:	EUSTIS FL 32736

Title	VP
Name	RILEY, APRIL D
Address	36949 E. ELDORADO LAKE DRIVE
City-State-Zip:	EUSTIS FL 32736

Title	DIRECTOR
Name	SCELZA, CAROLYN DR.
Address	7048 N. SHORE DRIVE
City-State-Zip:	LEESBURG FL 33478

Title	TREA
Name	LENTINI, MARILYN
Address	36951 E. ELDORADO LAKE DRIVE
City-State-Zip:	EUSTIS FL 32736

Title	D
Name	LENTINI, FRED
Address	36951 E. ELDORADO LAKE DRIVE
City-State-Zip:	EUSTIS FL 32736

Title	DIRECTOR
Name	WELCH, SUSAN K
Address	1792 WINDING RIDGE CIRCLE
City-State-Zip:	PALM BAY FL 32909

Title	DIRECTOR
Name	MASON, LEAH DR.
Address	7048 N. SHORE DRIVE
City-State-Zip:	LEESBURG FL 33478

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: MARILYN LENTINI**TREASURER****04/15/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date