

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04162

Entity Name: SAVE A PET FLORIDA, INC.**Current Principal Place of Business:**8042 VIA HACIENDA
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**P O BOX 2444
PALM BEACH, FL 33480 US**FEI Number:** 59-2425726**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WELLS, KATHLEEN M
8042 VIA HACIENDA
PALM BEACH GARDENS, FL 33418 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, DIRECTOR
Name	WELLS, KATHLEEN M
Address	8042 VIA HACIENDA
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	TREASURER, DIRECTOR
Name	MORRISON, RENEE
Address	336 EL VEDADO
City-State-Zip:	PALM BEACH FL 33480

Title	DIRECTOR
Name	GARCIA, XAVIER DR.
Address	502 28TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	PRESIDENT, DIRECTOR
Name	RINGLER, ERIN
Address	1001 N. FEDERAL HWY UNIT 12
City-State-Zip:	LAKE WORTH FL 33460

Title	SECRETARY, DIRECTOR
Name	WATSON, JUDI
Address	315 KELSEY PARK CIRCLE
City-State-Zip:	PALM BEACH GARDENS FL 33410

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: KATHLEEN WELLS**VICE PRESIDENT****03/02/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date