

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04162

Entity Name: SAVE A PET FLORIDA, INC.**Current Principal Place of Business:**6248 ROBINSON ST
JUPITER, FL 33458**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
6248 ROBINSON ST
JUPITER, FL 33458 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	PRESIDENT, DIRECTOR
Name	WELLS, KATHLEEN M
Address	6248 ROBINSON ST
City-State-Zip:	JUPITER FL 33458

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

Title	SECRETARY, DIRECTOR
Name	MERCER, JOHN
Address	4573 HUNTING TR
City-State-Zip:	LAKE WORTH FL 33467

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

Title	DIRECTOR
Name	ILLEL, KAREN DR.
Address	1504 SILVERLEAF OAK COURT
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	DIRECTOR
Name	CLARK, JENNIFER
Address	255 EVERNIA ST APT 517
City-State-Zip:	WEST PALM BEACH FL 33401

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

PRESIDENT

03/10/2016

Electronic Signature of Signing Officer/Director Detail_____
Date