

2013 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 EXECUTIVE DIRECTOR
Name WELLS, KATHLEEN
Address 6248 ROBINSON ST
City-State-Zip: JUPITER FL 33458

Title VP,D
Name TOMARIN, DEBRA
Address 600 SOUTH DIXIE HWY. APT 816
City-State-Zip: WEST PALM BEACH FL 33401

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

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

Title S,D
Name MASI, BARBARA
Address 226 SE FIRST AVENUE
City-State-Zip: BOYNTON BEACH FL 33435

Title PRESIDENT
Name POOLE, MICHELE
Address 4200 STATE RD 7
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name VIENS, DEBORAH
Address 17741 SE FEDERAL HWY
City-State-Zip: TEQUESTA FL 33469

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

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**EXECUTIVE DIRECTOR****01/15/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date