SIGNATURE: TIMOTHY SCANLON

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N05000010388

Entity Name: THE EMILY VERNON FOUNDATION FOR HOMELESS AND ABUSED ANIMALS INC.

#### **Current Principal Place of Business:**

5315 SOUTH SHORE BLVD. WELLINGTON, FL 33449

## **Current Mailing Address:**

BELLER SMITH, PL 2101 NW CORPORATE BLVD. #316 BOCA RATON, FL 33431

## FEI Number: 20-3597800

## Name and Address of Current Registered Agent:

BELLER, AMY B BELLER SMITH, P.L. 2101 NW CORPORATE BLVD.#316 BOCA RATON, FL 33431 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

#### **Officer/Director Detail :**

| Title           | PD                     | Title           | VPTD                        |
|-----------------|------------------------|-----------------|-----------------------------|
| Name            | SCANLON, TIMOTHY       | Name            | SCANLON, SHARON             |
| Address         | 5315 SOUTH SHORE BLVD. | Address         | 5315 SOUTH SHORE BLVD.      |
| City-State-Zip: | WELLINGTON FL 33449    | City-State-Zip: | WELLINGTON FL 33449         |
|                 |                        |                 | _                           |
| Title           | DIRECTOR               | Title           | D                           |
| Name            | THOMAS , SCANLON       | Name            | MENDEZ, EDWIN               |
| Address         | 1590 RIVERWOOD LANE    | Address         | 6405 EVANS STREET           |
| City-State-Zip: | CORAL SPRINGS FL 33071 | City-State-Zip: | HOLLYWOOD FL 33024          |
|                 |                        |                 |                             |
| Title           | DIRECTOR               | Title           | DIRECTOR                    |
| Name            | CALI , JOSEPH          | Name            | GIOVINCO, ARIEL             |
| Address         | 169 BENNETT AVENUE     | Address         | 13527 BARCELONA LAKE CIRCLE |
| City-State-Zip: | STATEN ISLAND NY 10314 | City-State-Zip: | DELRAY BEACH FL 33446       |
|                 |                        |                 |                             |

# Certificate of Status Desired: No

FILED Nov 12, 2014 Secretary of State CC1815706603

Date

Date