

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006278

Entity Name: PUPPY LOVE THERAPY DOGS, INCORPORATED

Current Principal Place of Business:

971 CR 478A
WEBSTER, FL 33597

Current Mailing Address:

971 CR 478A
WEBSTER, FL 33597

FEI Number: 80-0587448

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PITTS, ELLEN M
100 S. ASHLEY DRIVE, SUITE 1770
TAMPA, FL 33602 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 P
Name COLEMAN, KIRSTEN P
Address 971 CR 478A
City-State-Zip: WEBSTER FL 33597

Title S/T
Name COLEMAN, NINA J
Address 971 CR 478A
City-State-Zip: WEBSTER FL 33597

Title M
Name FRANZEN-ANDES, TINA
Address 516 NORTH MAIN STREET
City-State-Zip: BUSHNELL FL 33513

Title M
Name NOELL, SUSAN K
Address P.O. BOX 415
City-State-Zip: SUMTERVILLE FL 33585

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: NINA COLEMAN

SECRETARY

05/11/2014

Electronic Signature of Signing Officer/Director Detail

Date