### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000007385

Entity Name: MILO'S DOG RESCUE OF SOUTH FLORIDA, INC

FILED Feb 09, 2017 Secretary of State CC9149744967

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

49 NORTH FEDERAL HIGHWAY SUITE 141

POMPANO BEACH, FL 33062

### **Current Mailing Address:**

49 NORTH FEDERAL HIGHWAY SUITE 141 POMPANO BEACH, FL 33062

FEI Number: 46-0700381 Certificate of Status Desired: Yes

#### Name and Address of Current Registered Agent:

BILLINGSLEA, STACY J 49 NORTH FEDERAL HIGHWAY SUITE 141 POMPANO BEACH, FL 33062 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 Title T

Name BILLINGSLEA, STACY J Name EDELSTEIN, NATALIE

Address 49 NORTH FEDERAL HIGHWAY, Address 49 NORTH FEDERAL HIGHWAY,

SUITE 141 SUITE 141

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: POMPANO BEACH FL 33062

Title VP Title VC

Name FORD, DELORA Name WRIGHT, LESLEY

Address 49 NORTH FEDERAL HIGHWAY Address 49 NORTH FEDERAL HIGHWAY

SUITE 141 SUITE 141

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: POMPANO BEACH FL 33062

Title D Title DIRECTOR

Name GRAHAM, KRISTINA VANDER MALLIE Name GRIECO, MARIA

Address 49 NORTH FEDERAL HIGHWAY Address 49 NORTH FEDERAL HIGHWAY

SUITE 141 SUITE 141

City-State-Zip: POMPANO BEACH FL 33062 City-State-Zip: POMPANO BEACH FL 33062

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.