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.

L

Electronic Signature of Signing Officer/Director Detail

Entity Name: CROSSROADS SHIH TZU RESCUE, INC

**Current Principal Place of Business:** 

328 RHEA ST MONTICELLO, FL 32344

# **Current Mailing Address:**

2910 KERRY FOREST PARKWAY D-4-188 TALLAHASSEE, FL 32309 US

# FEI Number: 26-2942414

### Name and Address of Current Registered Agent:

LUND, LEANN 2910 KERRY FOREST PARKWAY D-4-188 TALLAHASSEE, FL 32309 US

FILED Apr 24, 2019 Secretary of State 9701503275CC

Certificate of Status Desired: No

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	D	Title	D	
Name	LUND, LEANN	Name	SLATEN, SHARON	
Address	2910 KERRY FOREST PARKWAY D-4-188	Address	2910 KERRY FOREST PARKWAY D-4-188	
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32309	
Title	DIRECTOR			
Name	DUBOSE, MARTHA			
Address	2910 KERRY FOREST PARKWAY D-4-188			
City-State-Zip:	TALLAHASSEE FL 32309			

PRESIDENT

04/24/2019

Date

Date