

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000152

**Entity Name:** BLACK CATS & OLD DOGS ANIMAL RESCUE, INC.

**Current Principal Place of Business:**

7911AVENAL LOOP  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

7911AVENAL LOOP  
NEW PORT RICHEY, FL 34655 US

**FEI Number:** 47-2721429

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD., SUITE A  
TAMPA, FL 33612 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            PRESIDENT  
Name            BURLEY, ARIANNE  
Address        7911AVENAL LOOP  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            TREASURER, SECRETARY  
Name            MCCLOSKEY, ASHLEY  
Address        7911AVENAL LOOP  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            DIRECTOR  
Name            BORDEN, CHRISTINE  
Address        7911AVENAL LOOP  
City-State-Zip: NEW PORT RICHEY FL 34655

Title            CAT DIRECTOR  
Name            HARTSFIELD, MICHELLE  
Address        7911AVENAL LOOP  
City-State-Zip: NEW PORT RICHEY FL 34655

*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:** ARIANNE BURLEY

**PRESIDENT**

**08/04/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date