

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N21000006169

Entity Name: OHAR-OPEN HANDS ANIMAL RESCUE, INC.

Current Principal Place of Business:

5051 SW 133RD AVENUE
OCALA, FL 34481

Current Mailing Address:

5051 SW 133RD AVENUE
OCALA, FL 34481 US

FEI Number: 86-3609322

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PRUETT, KIMBERLY
5051 SW 133RD AVENUE
OCALA, FL 34481 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 LEEDY, TAMIE
Address 14940 NE 180TH ST
City-State-Zip: FORT MCCOY FL 32134

Title SECRETARY/TREASURER
Name BUTCHER, SALLY
Address PO BOX 352
City-State-Zip: FORT MCCOY FL 32134

Title TRAINING
COORDINATOR/SPECIALIST
Name SALVATO, KATHY
Address 30 LOCUST RUN RADIAL
City-State-Zip: OCALA FL 34472

Title FARM SPECIALIST
Name HITT, JEAN
Address 10492 N MAGNOLIA AVE
City-State-Zip: ANTHONY FL 34475

Title V
Name PRUETT, KIMBERLY
Address 5051 SW 133RD AVE
City-State-Zip: OCALA FL 34481

Title BACKUP SECRETARY/TREASURER
AND ADOPTION SPECIALIST
Name DELEON, JESSICA
Address 5615 NW 61ST LN
City-State-Zip: OCALA FL 34482

Title OUTREACH/EQUINE THERAPY
Name JENKINS, REBECCA
Address 15943 SW 59TH AVE RD
City-State-Zip: OCALA FL 34473

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: TAMIE LEEDY

PRESIDENT

09/09/2022

Electronic Signature of Signing Officer/Director Detail

Date