

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006098

Entity Name: DALMATIAN RESCUE, INC.**Current Principal Place of Business:**972 N.E. 151ST STREET
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**P.O. BOX 640108
NORTH MIAMI BEACH, FL 33164**FEI Number: 52-2006801****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**DANE, PATRICIA
972 N.E. 151ST ST.
NORTH MIAMI BEACH, FL 33162 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	PD
Name	DANE, PATRICIA MRS.
Address	972 N.E. 151ST. STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	VPD
Name	DANE, MARK MMR.
Address	972 N.E. 151ST. ST.
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	T
Name	SMITH, PHILLIP JMR.
Address	972 N.E. 151ST STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	TD
Name	DANE, PATRICIA
Address	972 N.E. 151ST STREET
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	SD
Name	MCKINZEY, ALICE MRS.
Address	9159 CHIANTI CT.
City-State-Zip:	BOYNTON BEACH, FL 33472

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: PATRICIA DANE**PRES****04/30/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date