2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700941

FILED Jan 16, 2009 Secretary of State

Entity Name: LEESBURG HUMANE SOCIETY, INC.						
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
% MARY G. 41250 EME LEESBURG	RALDA ISLAI	ND ROAD US				
Current Mailing Address:			New Maili	New Mailing Address:		
	RALDA ISLAN 6, FL 34788	ND ROAD US				
FEI Number:	El Number: 59-0995127 FEI Number Applied For ()		FEI Number Not App	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
GERDING, 38979 CR 4 UMATILLA,	4A FL 32784	US submits this statement for th	oo purposo of changing	its registered office or	registered agent, or both	
in the State		subilits tills statement for ti	le purpose or changing	its registered office of	registered agent, or both,	
SIGNATUR						
	Electror	ic Signature of Registered.	Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () GERDING, MAR 38979 CR 44 A UMATILLA, FL	*	Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	DS () Delete BOTT, BARBARA R 38996 CR 44A UMATILLA, FL 32784		Title: Name: Address: City-St-Zip:	DS (X) Change BOHR, BARBARA R 38996 CR 44A UMATILLA, FL 32784	() Addition	
Title: Name: Address: City-St-Zip:	T () Delete MCDANIEL, TERI, 1308 PINE RIDGE DAIRY RD FRUITLAND PRK, FL		Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	BROWN, NORM 22205 BUCKHI		Title: Name: Address: City-St-Zip:	()Change	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY GERDING PRES 01/16/2009