

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706619

FILED  
Feb 15, 2011  
Secretary of State

**Entity Name:** THE HUMANE SOCIETY OF HIGHLANDS COUNTY, FLORIDA, INC.

**Current Principal Place of Business:**

7321 HAYWOOD TAYLOR BLVD  
SEBRING, FL 33876 US

**New Principal Place of Business:**

**Current Mailing Address:**

7321 HAYWOOD TAYLOR BLVD  
SEBRING, FL 33876 US

**New Mailing Address:**

**FEI Number:** 59-1104159

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHELTER, MANAGER  
7321 HAYWOOD TAYLOR BLVD  
SEBRING, FL., FL 33876 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SPIEGEL, JUDY  
Address: 2175 SCHLOSSER RD  
City-St-Zip: SEBRING, FL 33875

Title: VP  
Name: TULLIUS, R C  
Address: 44 VICTORY LN  
City-St-Zip: SEBRING, FL 33870

Title: ST  
Name: SMITH, ANN  
Address: 424 SWAN DR  
City-St-Zip: SEBRING, FL 33875

Title: D  
Name: VELDHUIS, GARY  
Address: 171 HILLSIDE DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

Title: D  
Name: BISSETT, SUSAN  
Address: 6308 AQUAVISTA DRIVE  
City-St-Zip: SEBRING, FL 33876

Title: D  
Name: HOFFER, PAT  
Address: 115 LONGWOOD ROAD  
City-St-Zip: SEBRING, FL 33870

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: ANN SMITH

ST

02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date