## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 706728** 

FILED Apr 19, 2008 Secretary of State

Entity Name: SOCIETY FOR PREVENTION OF CRUELTY TO ANIMALS OF WEST PASCO, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7734 CONGRESS ST NEW PORT RICHEY, FL 346531110 US **Current Mailing Address: New Mailing Address:** P.O. BOX 38 NEW PORT RICHEY, FL 346560038 US FEI Number: 59-1144139 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MURRAY, MARTHA 7734 CONGRESS ST. NEW PORT RICHEY, FL 34653 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete (X) Change ( ) Addition BLAESING, DIONNE ARMSTRONG, GAIL Name: Name: 5946 MAIN ST. Address: 1403 BURNT OAK STREET Address: City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: TARPON SPRINGS, FL 34689 US Title: Title: (X) Change ( ) Addition ( ) Delete THOMAS, MOLLY Name: CAMPAGNA, KAREN Name: Address: 8824 BELAGIO DRIVE Address: 109 AUGUSTA AVENUE City-St-Zip: TRINITY, FL 34655 City-St-Zip: PALM HARBOR, FL 34683 US Title: () Delete Title: (X) Change ( ) Addition MOORE, BETTY E GALLEGOS, LIA Name: Name: Address: 13135 MISTY LANE Address: 5928 JACKSON STREET City-St-Zip: HUDSON, FL 34669 City-St-Zip: NEW PORT RICHEY, FL 34653 US Title: ( ) Delete Title: (X) Change ( ) Addition MAGAVERO, KENDRA Name: MURRAY, MARTHA Name: 7904 ROUNDELAY DRIVE Address: 8244 WISHBONE ROAD Address: City-St-Zip: BROOKSVILLE, FL 34602 City-St-Zip: NEW PORT RICHEY, FL 34654 US Title: () Delete Title: ( ) Change (X) Addition THOMAS, MOLLY Name: Name: 8824 BELAGIO DRIVE Address: Address: City-St-Zip: City-St-Zip: TRINITY, FL 34655 US Title: () Delete Title: ( ) Change (X) Addition MURRAY, MARTHA Name: Name: Address: Address: 8244 WISHBONE ROAD BROOKSVILLE, FL 34602 US City-St-Zip: City-St-Zip:

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: MARTHA MURRAY EO 04/19/2008