

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708180

FILED
Jan 19, 2010
Secretary of State

Entity Name: THE ANIMAL WELFARE LEAGUE OF CHARLOTTE COUNTY, FLORIDA, INC.

Current Principal Place of Business:

3519 DRANCE ST.
CHARLOTTE HARBOR, FL 33980

New Principal Place of Business:

Current Mailing Address:

3519 DRANCE ST.
CHARLOTTE HARBOR, FL 33980

New Mailing Address:

FEI Number: 59-1146309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, DEE ANN
3519 DRANCE ST.
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

THOMAS, SHARON
3519 DRANCE ST.
PORT CHARLOTTE, FL 33980 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: SHARON THOMAS

01/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD
Name: KAGAN, RITA
Address: 674 KELLSTADT ST
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VD
Name: MOLDOFF, BARRY
Address: 1035 VIA FORMIA
City-St-Zip: PUNTA GORDA, FL 33950

Title: T
Name: JONES, TRAVIS
Address: 115 CRESCENT DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: P
Name: MCLEWIN, PETER
Address: 1356 JACANA COURT
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD
Name: WITTICH, DIANA
Address: 4370 GARDNER DR
City-St-Zip: PT CHARLOTTE, FL 33952

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: SHARON THOMAS

ED

01/19/2010

Electronic Signature of Signing Officer or Director

Date