2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714747

Apr 23, 2009 Secretary of State

Entity Name: GULF COAST HUMANE SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

2010 ARCADIA ST

FORT MYERS, FL 33916 US

Current Mailing Address: New Mailing Address:

2010 ARCADIA ST

FORT MYERS, FL 33916 US

FEI Number: 59-0806978 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:

COHEN, DONALD 2136 NW 21ST PL

CAPE CORAL, FL 33993 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:

DVP2 () Delete CRAWFIS, CHRISTINA Name: 15970 GRASSHOPPER CT Address:

City-St-Zip: FORT MYERS, FL 33912

Title: DVP1 () Delete KAY, HENRION Name: Address: 1353 STADLER

City-St-Zip: FORT MYERS, FL 33901

() Delete Title: DS

NOEL, LORI Name: 1100 HAWKS NEST CT. Address: City-St-Zip: PUNTA GORDA, FL 33950

Title: DT () Delete

Name: JONES, BRIDGET 8970 ABBOTSFORD TERRACE Address: City-St-Zip: FORT MYERS, FL 33912

Title: DT2 () Delete SCAROLA, NOREEN Name: 1491 OAKES BLVD Address: City-St-Zip: NAPLES, FL 34119

Title: () Delete SCAROLA, MARK Name: Address: 1491 OAKES BLVD NAPLES, FL 34119

City-St-Zip:

(X) Change () Addition

ELKINS, CHAD Name: Address: 27780 MATHESON AVE.

City-St-Zip: BONITA SPRINGS, FL 34135

Title: (X) Change () Addition Name: KAY, HENRION Address: 1353 STADLER

City-St-Zip: FORT MYERS, FL 33901

Title: (X) Change () Addition STEVENS, ESTHER MARGIE Name: 3013 DEL PRADO BLVD, STE 15 Address: City-St-Zip: CAPE CORAL, FL 33904

Title: DM (X) Change () Addition

Name: LEFFLER, RYAN Address: 8695 COLLEGE PKWY City-St-Zip: FORT MYERS, FL 33919

Title: (X) Change () Addition

DICKEY, PATRICIA Name: 14411 BALD EAGLE DR. Address: City-St-Zip: FORT MYERS, FL 33912

Title: (X) Change () Addition

SCAROLA, MARK Name: Address: 1491 OAKES BLVD NAPLES, FL 34119 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: MARK SCAROLA DVP1 04/23/2009

Electronic Signature of Signing Officer or Director

Date