

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739487

FILED
Jun 13, 2011
Secretary of State

Entity Name: THE HUMANE SOCIETY OF PENSACOLA, FLORIDA, INC.

Current Principal Place of Business:

5 NORTH Q ST
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

5 NORTH Q ST
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 59-6002691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OHLHORST, ELIZABETH
3790 LEGENDCREEK DRIVE
PACE, FL 32571 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: T
Name: REESE, CEIL
Address: 1197 BRAD THOMAS DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: S
Name: MONKS, JANICE
Address: 5924 SARAH DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: D
Name: PITTS, PATRICIA
Address: 2130 KARLBERG DR.
City-St-Zip: PENSACOLA, FL 32506

Title: VP
Name: BROUGHAM, SHIRLEY
Address: 101 SHIRLEY DRIVE
City-St-Zip: GULF BREEZE, FL 32561

Title: S
Name: CHENEY, KIMBERLY
Address: 6878 CEDAR LAKE DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: D
Name: SAWYER, BARBARA
Address: 5027 SKYLARK CT
City-St-Zip: PENSACOLA, FL 32505

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: ELIZABETH OHLHORST

D

06/13/2011

Electronic Signature of Signing Officer or Director

Date