

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745318

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** CLAY COUNTY HUMANE SOCIETY, INC.

**Current Principal Place of Business:**

2230 FILMORE STREET  
ORANGE PARK, FL 32065 US

**New Principal Place of Business:**

**Current Mailing Address:**

2230 FILMORE STREET  
ORANGE PARK, FL 32065 US

**New Mailing Address:**

**FEI Number:** 59-1894727      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

KESKINEN, JANET  
2153 CENTER WAY  
DOCTOR'S INLET, FL 32068 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: SD  
Name: KESKINEN, JANET  
Address: 2153 CENTER WAY  
City-St-Zip: DOCTORS INLET, FL 32068

Title: D  
Name: EHRENBURG, BOB  
Address: 2656 WHIPPLE AVE  
City-St-Zip: ORANGE PARK, FL 32073

Title: PD  
Name: MILAN, JERRY  
Address: 548 SAM CHASE PLACE  
City-St-Zip: ORANGE PARK, FL 32073

Title: D  
Name: LEMEN, LISA  
Address: 3138 FIELDCREST DRIVE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD  
Name: LAKE, LINDA  
Address: 2406 SOURWOOD COURT  
City-St-Zip: ORANGE PARK, FL 32065

Title: VD  
Name: KEYWORTH, CHRIS  
Address: 424 PERTSHIRE DRIVE  
City-St-Zip: ORANGE PARK, FL 32065

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: JANET KESKINEN

SD

03/20/2012

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

\_\_\_\_\_  
Date