2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 10, 2006 8:00 am Secretary of State

	ANNOAL	REPORT			. ~			
1. Entity Nam	MENT #754178 R HUMANE SOCIETY, INC.					07-10-2006	90028 043 ****7 500220	
Principal Place of Business 1 SHELTER DRIVE PALM COAST, FL 32137 US		Mailing Address 1 SHELTER DRIVE PALM COAST, FL 32137 US		t 188111 1888 1 1	TITE BURRO NURNI ARBON ARTA		.	
2. Principal P	lace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07032006	Chg-NP	CR2E037 (4/06)		
City & Stat	е	City & State	City & State		4. FEI Number 59-2247	034		pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of	Status Desired	See Require	
·	6. Name and Address of Current I	Registered Agent			7. Name and A	ddress of New R	egistered Agent	
BAYER, DENNIS K 306.S. OCEANSHORE BLVD FLAGLER BEACH, FL 32136			Name Lucy M. Ayellar Street Address (P.D. Box Number is Not Acceptable) Palm Coast City FL Zip Code 32144				de	
8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or or ded name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
			eaign Financing ntribution.		\$5.00 May Be Added to Fees		ake check payable ida Department of S	
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHAI	IGES TO OFFICE	RS AND DIRECTORS I	N 10
TITLE NAME STREET ADDRESS CITY-S1-ZIP	DP AVELLAR, LUCY 3 WAYWOOD PLACE PALM COAST, FL 32164	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SCHAGEN, SUZANNE 3-RYLEY LANE PALM COAST, FL-32164	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Do 2- Pa	cothy l z well: Im Coc	lernier stream ist FL	Change 19 nc 32164	☐ Addition
HITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WOOD, JOYCE 70 COURTNEY OLAGE PALM COAST, EL 32137	☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ľ		c+ Cognt (Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DHT THULIN, BETH 1022 S. DAYTONA AVE. FLAGLER BEACH, FL 32136	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KO RWEK, JUDITH 27 COOL WATER COURT PAL M COAST, FL 321 37	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	731	Vonne Cardw Elm Co	Presley ell Cour	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed or on an attachment with an address, with all other like empowered.								

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SIĞNATUR	E AND TYPED D	R PRINTED	NAME OF	BIGNING	OFFICER OF	DIRECTO

7-5-06

Date Daytime Phone #