## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 756921** 

FILED Jan 05, 2011 Secretary of State

Entity Name: DOMESTIC ABUSE SHELTER, INC.

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

531 SOUTHARD ST. 531 SOUTHARD ST. KEY WEST, FL 33040 KEY WEST, FL, FL 33040

Current Mailing Address: New Mailing Address:

P O BOX 522696 MARATHON SHORES, FL 33052

FEI Number: 59-2153608 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:

KAHN, LARRY 531 SOUTHARD ST KEY WEST, FL 33040 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:**

Title: F

 Name:
 KAHN, LARRY

 Address:
 531 SOUTHARD ST

 City-St-Zip:
 KEY WEST, FL 33040

Title: D

Name: GRUETZMANN, ANGELA

Address: 510 43RD ST

City-St-Zip: MARATHON, FL 33050

Title: VP

Name: MARZOA, GUADALUPE Address: 10680 7TH AVE GULF City-St-Zip: MARATHON, FL 33050

Title:

Name: KOLER, KATE

Address: 1111 STIRRUP KEY WOODS RD

City-St-Zip: MARATHON, FL 33050

Title: [

Name: CANTER, SHEILA

Address: 29826 TROPICAL TRADER RD City-St-Zip: BIG PINE KEY, FL 33043

Title: [

 Name:
 BOYDEN, HAROLD

 Address:
 777 WEST 63RD ST

 City-St-Zip:
 MARATHON, FL 33050 US

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: LARRY KAHN P 01/05/2011