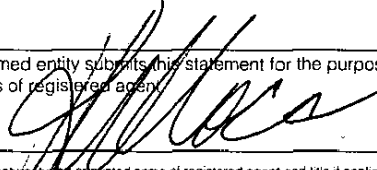
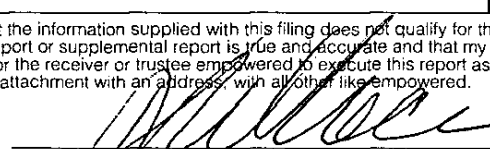


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90227 012 ****61.25

DOCUMENT # 758574 1. Entity Name HUMANE SOCIETY OF GREATER JUPITER/TEQUESTA, INC.			
Principal Place of Business INDIANTOWN RD SEAGRAPE PLAZA UNIT 213 P.O. BOX 1843 JUPITER FL 33468-8843		Mailing Address INDIANTOWN RD SEAGRAPE PLAZA UNIT 213 P.O. BOX 1843 JUPITER FL 33468-8843	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 185 E INDIANTOWN RD. Suite, Apt. #, etc. #211 City & State JUPITER, FL Zip 33477	
Country USA		Country FLA	
4. FEI Number 59-2111273		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STARLING ROCA, KAY-LYNETTE 185 W. INDIANTOWN RD., STE #125 P.O. BOX 1843 JUPITER FL 33468		7. Name and Address of New Registered Agent Name KAY-LYNETTE STARLING ROCA Street Address (P.O. Box Number is Not Acceptable) 185 E INDIANTOWN RD. #205 City JUPITER	
State FL		Zip Code 33477	
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  DATE 4/27/04			
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D OSBORN, ANDREA 1ST 38 72ND AVE NO PALM BEACH GARDENS FL 33418	TITLE	TREASURER SECRETARY ANDREA OSBORN 15438 72ND DR. PALM BEACH GARDENS, FL 33418
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VPD	TITLE	PRESIDENT
NAME	DEAN, LINDA	NAME	STEVE MACARI
STREET ADDRESS	152 N RIUCK DR E	STREET ADDRESS	149 FERN ST.
CITY-ST-ZIP	JUPITER FL 33458	CITY-ST-ZIP	JUPITER, FL 33458
TITLE	D	TITLE	VICE PRESIDENT
NAME	STARLING-ROCA, KAY-LYNETTE	NAME	ETT LEGATO
STREET ADDRESS	367 COUNTRY CLUB DR.	STREET ADDRESS	9 BAYVIEW COURT
CITY-ST-ZIP	TEQUESTA FL	CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	PD	TITLE	TREASURER
NAME	GOMEZ, BARBARA	NAME	JOE FUELBACH
STREET ADDRESS	142 CHAPEL LN	STREET ADDRESS	P.O. BOX 33448
CITY-ST-ZIP	TEQUESTA FL 33409	CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	D	TITLE	
NAME	MARY, HALLIGEN	NAME	
STREET ADDRESS	520 ZANADA PLACE	STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33477	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.			
SIGNATURE: 		Date 4/27/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone	