2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004458

FILED Apr 18, 2005 Secretary of State

Entity Name: WORLD SOCIETY FOR THE PROTECTION OF ANIMALS, INC.

Current Principal Place of Business: New Principal Place of Business: 34 DELOSS STREET FRAMINGHAM, MA 01702 **Current Mailing Address: New Mailing Address:** 34 DELOSS STREET FRAMINGHAM, MA 01702 FEI Number: 04-2718182 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SALTER, LAURA SIMPSON, LAURA Name: Name: 34 DELOSS STREET Address: 34 DELOSS STREET Address: City-St-Zip: FRAMINGHAM, MA 01702 City-St-Zip: FRAMINGHAM, MA 01702 Title: () Delete Title: (X) Change () Addition IRWIN, PAUL Name: HAWK, LARRY Name: Address: 34 DELOSS STREET Address: 34 DELOSS STREET City-St-Zip: FRAMINGHAM, MA 01702 City-St-Zip: FRAMINGHAM, MA 01702 Title: VS () Delete Title: (X) Change () Addition WIRTH, HUGH WIRTH, HUGH Name: Name: Address: 34 DELOSS STREET Address: 34 DELOSS STREET City-St-Zip: FRAMINGHAM, MA 01702 City-St-Zip: FRAMINGHAM, MA 01702 Title: () Delete Title: (X) Change () Addition Name: CUMMINGS, ROBERT Name: CUMMINGS, ROBERT Address: 34 DELOSS STREET Address: 34 DELOSS STREET City-St-Zip: FRAMINGHAM, MA 01702 City-St-Zip: FRAMINGHAM, MA 01702 Title: () Delete Title: () Change (X) Addition SWANN, BILL Name: Name: 34 DELOSS ST. Address: Address: City-St-Zip: City-St-Zip: FRAMINGHAM, MA 01702

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LAURA SIMPSON ED 04/18/2005