

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004458

FILED  
Apr 03, 2009  
Secretary of State

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

**Current Principal Place of Business:**

89 SOUTH ST.  
201  
BOSTON, MA 02111

**New Principal Place of Business:**

**Current Mailing Address:**

89 SOUTH ST.  
201  
BOSTON, MA 02111

**New Mailing Address:**

**FEI Number:** 04-2718182

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: ED ( ) Delete  
Name: KORNBERG, ALLAN DR.  
Address: 89 SOUTH ST.  
City-St-Zip: BOSTON, MA 02111

Title: T ( ) Delete  
Name: LUKE, CARTER  
Address: 350 SOUTH HUNTINGTON AVE.  
City-St-Zip: BOSTON, MA 02130

Title: P ( ) Delete  
Name: CUMMINGS, ROBERT S  
Address: 89 SOUTH ST.  
City-St-Zip: BOSTON, MA 02111

Title: S ( ) Delete  
Name: BOWEN, JOHN  
Address: 89 SOUTH ST.  
City-St-Zip: BOSTON, MA 02111

Title: DIR ( ) Delete  
Name: DAVIES, PETER R  
Address: 89 SOUTH ST.  
City-St-Zip: BOSTON, MA 02111

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ED (X) Change ( ) Addition  
Name: WEST, CECILY  
Address: 89 SOUTH ST.  
City-St-Zip: BOSTON, MA 02111

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CECILY WEST

ED

04/03/2009

Electronic Signature of Signing Officer or Director

Date