

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003014

FILED
Apr 22, 2009
Secretary of State

Entity Name: THE NEW RESPONSIBLE PEOPLE-PET OWNERSHIP SELF-EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

1170 N.W. 79 ST., 208-B
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1170 N.W. 79 ST., 208-B
MIAMI, FL 33150

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NEW GRAF PAIGE AND ASSOCIATES, INC.
1170 N.W. 79 ST., 208-B
MIAMI, FL 33150 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: DPT () Delete
Name: PAIGE, WILLIAM G
Address: 1170 N.W. 79 ST., 208-B
City-St-Zip: MIAMI, FL 33150

Title: DV () Delete
Name: PAIGE, PATRICK H
Address: 7819 N.W. 228TH STREET
City-St-Zip: RAIFORD, FL 320264230

Title: S () Delete
Name: SLADE, SCHALLOT C
Address: 1170 N.W. 79 ST., 208-B
City-St-Zip: MIAMI, FL 33150

Title: DVP () Delete
Name: PAIGE, THOMAS R
Address: 1 HENDERSON RD
City-St-Zip: LAKE PLACID, FL 33852

Title: DCS () Delete
Name: PEREZ, EFREN
Address: 10000 CARRIBEAN BLVD
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: WILLIAM G PAIGE

DPT

04/22/2009

Electronic Signature of Signing Officer or Director

Date