

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002416

FILED
Apr 15, 2009
Secretary of State

Entity Name: PAPILLON 911 RESCUE AND ADOPTION, INC.

Current Principal Place of Business:

2335 LITTLE JOHN TRAIL
MARIETTA, GA 30067

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 682225
MARIETTA, GA 300680038

New Mailing Address:

2335 LITTLE JOHN TRAIL
MARIETTA, GA 30067

FEI Number: 31-1835360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TERRY, KATHLEEN
3223 RIVIERA DRIVE
CORAL GABLES, FL 33134 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: CP () Delete
Name: MCLAUGHLIN, LYN
Address: 2335 LITTLE JOHN TRAIL
City-St-Zip: MARIETTA, GA 30067

Title: D () Delete
Name: PAMEKA, JOHNSON J
Address: 458 OAK GROVE RD.
City-St-Zip: MADISONVILLE, TN 37354

Title: D (X) Delete
Name: COMPTON, PATRICIA W
Address: 4538 COLUMNS DR.
City-St-Zip: MARIETTA, GA 30067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: MCLAUGHLIN, LYN B
Address: 2335 LITTLE JOHN TRAIL
City-St-Zip: MARIETTA, GA 30067 US

Title: D (X) Change () Addition
Name: LITTLE, LISA M
Address: 3970 CRIPPLE CREEK DR
City-St-Zip: KENNESAW, GA 30144 US

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: LYN MCLAUGHLIN

CP

04/15/2009

Electronic Signature of Signing Officer or Director

Date