## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Feb 05 1998 8:00am Secretary of State

1. Corporation Name + + + + + + + + + + + + + + + + + + +														
PETSMART CHARITIES, INC.														
י שישוויו פוויאווושפן ווושי											:			HINA MALAMA
Principal Plac	e of Rusines	.c	<del></del> ,		Mailing Address									
										Ĺ	·····			
19801 N. 27TH AVENUE   PHOENIX AZ 85027					19801 N. 27TH AVENUE PHOENIX AZ 85027						3. Date Incorporated or Qualified			
, , , , , , , , , , , , , , , , , , , ,				,						}	05/09/1996 4. FEI Number		1 14	- 0 - d Fau
										1	93-1140967			oplied For ot Applicable
2. Principal P	lace of Busin	ness	<del>_</del>	2a. Mailing Address										Additional
21				26	26					ļ	5. Certificate of Status Desired		<b>+</b>	equired
Suite, Apt.	#, etc.				Suite, Apt. #, etc.						6. Election Campaign Financing		\$5.00	
22 City & Stat		27	City & State						Trust Fund Contribution		Added to			
23 City & Stat	9		_	28	- <del>                                    </del>						7. Is this nonprofit corporation a ho		rs associatio □ No	n?
Zip	Country				Zip			Country			8. This corporation owes or has pai	d the cu	rrent year Int	angible
24	A Managa	444	29				<del></del>			Personal Property Tax due June		<del>_</del>	] No	
9, Name and Address of Current Registered Agent									Name		10. Name and Address of New Reg	jistered	Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC.								61						
1201 HAYS STREET					SIEM, INC.			B2	Street Addres		s (P.O. Box Number is Not Acceptable	e)		
SUITE 105								63						
	ASSEE FL	3230	)1					B4	City				ler Zin	Code
												FL	.	
11. Pursuant office or r	ions ent.	of Sections 617,050 or both, in the State	2 and 6	17.1508, Florida S	itatutes	s, the ab-	the above-named corporation			ation submits this statement for the problem of directors. I hereby accept	urpose o	f changing it	s registered	
agent. I a	m familiar w	th a	nd accept the oblig	ations o	f, Section 617.050	3, Flori	ida Statu	ites		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	s's board of directors. I hereby accep	. u.o upp	JOHN 1110111 40	Togicto. oo
SIGNATURE .	Signature hoped	or exic	nted name of registered age	on and title	f applicable	MOTE	Registered	Acor	of planshup to	soulred :	yhen reinsteting)	DATE		
12.	Oignaidit, types	С. р.,	OFFICERS AN				13.			oquillo 1	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12
TITLE	STD			☐ DELETE			1.1 THTU	1.1 TITLE					Change	Addition
NAME	DORSE							1.2 NAME						
STREET ADDRESS		ST AVE SUITE C	100	00			1.3 STREET ADDRESS							
CITY-ST-ZIP	PHOENI	X AZ	<u>/ 85051</u>		☐ DELETE			1.4 CITY - ST - ZIP					T 101	4.4490
TITLE NAME	CD	. 147	Meici D. I					2.1 TITLE R.2 NAME					Change	Addition
STREET ADDRESS	î .	•	INFIELD L TH AVENUE					3 STREET ADDRESS						
CITY-ST-ZIP	PHOENI							4 CITY-ST-ZIP						
TITLE	P		- GOOL!		DELETE			1 TITLE					Change	Addition
NAME	STULBE	RG,	DR. LYNN DVM					NAME						
STREET ADDRESS	19601 N	l. 27	TH AVENUE					STREET ADDRESS						
CITY-ST-ZIP	PHOENI	<u>X AZ</u>	85027					CITY-ST-ZIP						
TITLE	D				☐ DELETE	<u> </u>	TITL						Change	Addition
NAME	SPEAR,							NAME STREET ADDRESS						
STREET ADDRESS	ALLOWING ART AREA				CITY-				ŀ					
CITY-ST-ZIP TITLE	FINCEIN	<u> </u>	, 60021		☐ DELETE		TITL	_	-2119				Change	Addition
NAME							NAM		- 1					
STREET ADDRESS									ADDRESS					
CITY-ST-ZIP	·						4 CITY		- 1					
TITLE					☐ DELETE		6.1 TITL	E					Change	Addition
NAME							6.2 NAV	Œ						
STREET ADDRESS .						6.3 STREET			ADDRESS					
CITY-ST-ZIP			)				6.4 CITY	-ST	- ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for he exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted, or an attachment with an address.