2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001154

Entity Name: FLORIDA BOXER RESCUE, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6151 SEQUOIA DR 2039 EAST CROOKED LAKE DRIVE

PORT ORANGE, FL 32127 EUSTIS, FL 32726

Current Mailing Address: New Mailing Address:

6151 SEQUOIA DR. 2039 EAST CROOKED LAKE DRIVE

PORT ORANGE, FL 32127 EUSTIS, FL 32726

FEI Number: 59-3630500 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:

EVE, SEMANIE COX, MARILYNETTE

6151 SEQUOIA DR. 2039 EAST CROOKED LAKE DRIVE

PORT ORANGE, FL 32127 US EUSTIS, FL 32726 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: MARILYNETTE COX 04/21/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

 Name:
 CLEMENT, SANDY
 Name:
 CLEMENT, SANDY

 Address:
 6808 APPLEWOOD DR
 Address:
 104 MOSSY LAKE CIRCLE

 City-St-Zip:
 WESLEY CHAPEL, FL 33544
 City-St-Zip:
 PERRY, GA 31069

Title: V () Delete Title: VD (X) Change () Addition Name: BIGSBY, COLLEEN Name: BIGSBY, COLLEEN

Address: 2347 MERRILY CIRCLE S Address: 2347 MERRILY CIRCLE SOUTH

City-St-Zip: SEFFNER, FL 33584 City-St-Zip: SEFFNER, FL 33584

Title: T () Delete Title: T (X) Change () Addition
Name: PARRISH, PAULINE Name: ROYAL, THOMAS C

Address: 2506 W BURR OAK CT Address: 8720 BRIDLEWOOD WAY
City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SEMINOLE, FL 33777

Name: SEMANIE, EVE Name: COX, MARILYNETTE

Address: 6151 SEQUOIA DRIVE Address: 2039 EAST CROOKED LAKE DRIVE

City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: EUSTIS, FL 32726

Name: Name: KNAPKO, ANGIE

 Address:
 Address:
 6442 WELLESLEY DRIVE

 City-St-Zip:
 City-St-Zip:
 BRADENTON, FL 34207

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: MARILYNETTE COX S 04/21/2009