2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2008
Secretary of State

DOCUMENT# N00000002981

Entity Name: CHIHUAHUA RESCUE AND TRANSPORT, INC.

Current Principal Place of Business:

1932 WOODRING RD.
SANIBEL, FL 339573433

New Principal Place of Business:

1932 WOODRING RD.
SANIBEL, FL 33957

Current Mailing Address:

3414 PEMBERTON DR
PEARLAND, TX 77584

New Mailing Address:

FEI Number: 65-1018866 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALL, DIXIE LEE
1420 SE 47TH ST.
CAPE CORAL, FL 33904 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:	PD	( ) Delete
Name:	BUNTEN, LYNNIE	
Address:	11489 S. FOSTER RD	
City-St-Zip:	SAN ANTONIO, TX 78223	
Title:	VD	( ) Delete
Name:	PITRE, ROBIN	
Address:	904 HIDEAWAY CT	
City-St-Zip:	KELLER, TX 76248	
Title:	TD	( ) Delete
Name:	CRAVER, GRETCHEN	
Address:	3414 PEMBERTON DR	
City-St-Zip:	PEARLAND, TX 775849483	
Title:	D	( ) Delete
Name:	HENSEL, SANDRA	
Address:	7500 N. ELMHURST RD. #488	
City-St-Zip:	DES PLAINES, IL 60018	
Title:	D	( ) Delete
Name:	KRUGER, JENNY	
Address:	6601 GULFPORT BLVD. S.	
City-St-Zip:	SAINT PETERSBURG, FL 33707	
Title:	SD	( ) Delete
Name:	HASENSTAB, LAURA	
Address:	1407 CHASE AVE	
City-St-Zip:	CINCINNATI, OH 45223	

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:	D	(X) Change ( ) Addition
Name:	HENSEL, SAUNDRA	
Address:	7500 N. ELMHURST RD. #488	
City-St-Zip:	DES PLAINES, IL 60018	
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: GRETCHEN CRAVER TD 02/10/2008
Electronic Signature of Signing Officer or Director — Date