


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008 8:00 am
Secretary of State

01-18-2008 90008 020 ****70.00

DOCUMENT # N00000004398		
1. Entity Name HAPPY TAILS ANIMAL RESCUE, INC.		
Principal Place of Business PET SMART LUV-A-PET OR ADOPTION FAIRS JACKSONVILLE, FL 32225	Mailing Address 1034 SHIPWATCH DR JACKSONVILLE, FL 32225	



01132008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3666312	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
BEECROFT, PHYLLIS L 1034 SHIPWATCH DR E JACKSONVILLE, FL 32225

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Phyllis L Beecroft* (NOTE: Registered Agent signature required when reinstating) DATE *Jan 14 - 2008*

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BONDI, GAIL 11374 WEEDEN ISLAND WAY JACKSONVILLE, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KLOTH, DEBRA 2541 PAULA AVE JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEECROFT, PHYLLIS L 1034 SHIPWATCH DR E JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FARNSWORTH, JANICE 8141 ODEN JACKSONVILLE, FL 32216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

Delete please ←

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Phyllis L Beecroft*

Jan 14 2008