

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004406

FILED
Apr 05, 2002 8:00 AM
Secretary of State

Entity Name: NATIONAL HUMANE SOCIETY, INC.

Current Principal Place of Business:

5327 S.W. 33RD AVE
FT LAUDERDALE, FL 33312

New Principal Place of Business:

3830 N. GUNN HWY.
TAMPA, FL 33624

Current Mailing Address:

5327 S.W. 33RD AVE
FT LAUDERDALE, FL 33312

New Mailing Address:

P.O. BOX 8508
DEERFIELD BEACH, FL 334438508

FEI Number: 65-1088759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIGHTBOURN, KELLIE
5327 SW 33RD AVENUE
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

LIGHTBOURN, KELLIE ESQUIRE
3830 N GUNN HWY.
TAMPA, FL 33624 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: KELLIE LIGHTBOURN

04/05/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: LIGHTBOURN, KELLIE
Address: 5327 S.W. 33RD AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DT () Delete
Name: EXARHOS, NICHOLAS DR
Address: 5327 S.W. 33RD AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DV () Delete
Name: CHILDS, CAROL
Address: 19000 S.E. MACK DAIRY ROAD
City-St-Zip: JUPITER, FL 33478

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: CHILDS, CAROL
Address: 570 JEFFERSON DRIVE #112
City-St-Zip: DEERFIELD BCH, FL 33442

Title: DT (X) Change () Addition
Name: EXARHOS, KELLIE
Address: 3830 N GUNN HWY
City-St-Zip: TAMPA, FL 33624

Title: DV (X) Change () Addition
Name: EXARHOS, NICK DR.
Address: 3830 N GUNN HWY
City-St-Zip: TAMPA, FL 33624

Title: S () Change (X) Addition
Name: CURCIO, MARY
Address: WATER DANCE WAY
City-St-Zip: LAKE WORTH, F 33222

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL CHILDS

DP

04/05/2002

Electronic Signature of Signing Officer or Director

Date