2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004988

FILED May 12, 2008 Secretary of State

Entity Name: VETS-PETS & KIDS CRISIS CENTERS OF FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business: 2500 FORSYTH RD 5910 YUCATAN DR UNIT D16 ORLANDO, FL 32807 US ORLANDO, FL 32807 US **New Mailing Address: Current Mailing Address:** 5910 YUCATAN DRIVE ORLANDO, FL 32807 US FEI Number: 59-3663204 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARCHETTI, MARC 5910 YUCATAN DRIVE US ORLANDO, FL 32807 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MARCHETTI, MARC Name: Name: 5910 YUCATAN DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32807 US City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition Name: CUMMINGS, CARROLL Name: BROTZMAN, DAVID Address: 8228 SPRING BREEZE CT Address: 2212 S CHICKASAW TR. #178 City-St-Zip: ORLANDO, FL 32829 US City-St-Zip: ORLANDO, FL 32825 US Title: () Delete Title: () Change () Addition BARTON, TERRI L Name: Name: 5910 YUCATAN DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32807 US City-St-Zip: Title: SAA () Delete Title: SAA (X) Change () Addition Name: GALLIPEAU, CHARLES Name: GALLIPEAU, CHARLES 801 WURST ROAD 1420 CENTER STREET Address: Address: City-St-Zip: OCOEE, FL 34761 US City-St-Zip: OCOEE, FL 34761 US Title: () Delete Title: (X) Change () Addition DAVIS RENDA, DIANE E CUMMINGS, CARROLL Name: Name: 4133 GREENBLUFF RD 8228 SPRING BREEZE CT Address: Address: City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: ORLANDO, FL 32829

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: MARC MARCHETTI PR 05/12/2008