2004 NOT-FOR-PROFIT CORPORATION

FILED Jan 12, 2004 8:00 am Secretary of State

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DOCUMENT # N0000007235 1. Entity Name CRITTER ADOPTION AND RESCUE EFFORT, INC.							01-12-2004 90026 001 ****70.00					
Principal Place of Business 1528 27 STREET SOUTHEAST RUSKIN, FL 33570				Mailing Address 1528 27 STREET SOUTHEAST RUSKIN, FL 33570								
2. Principal P	lace of Busin	3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				01072004	Chg-NP	CB3E03	7 (10(02)			
City & State	. <u> </u>	City & State				4. FEI Number				plied For		
Zip				Zip Coun			59-3678003			\ \ \ d		t Applicable
	<u> </u>			· <u></u>				5. Certificate of	<u> </u>		8.75 Add	
<u></u>	6. Name	and Address of Current i	Registered	Agent		7. Name and Address of New Registered Agent Name						
RONDON, SUSAN 1528 27 STREET SOUTHEAST						Street Address (P.O. Box Number is Not Acceptable)						· _
RUSKIN, F	·L 33570			150			28 27 TH STREET SE					
						City.		USKIN FL Zip Code 33570 .				
8. The above the obligat	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											
	1 Decimination of the state of											
SIGNATURE .	SIGNATURE / And Y Andluve Donard L. HINDER LITER OF DIRECTORS Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
Filling Fee is \$61.25 9. Election Campaign Financing Trust Fund Contribution.							\$5.00 May Be Added to Fees			payable to ment of Si		
10.		OFFICERS AND DIF	RECTORS		11.			ADDITIONS/CHAN	GES TO OFFICER			
TITLE NAME	P OTT, HAL	. DR.		☐ Delete	NAM	E E	DMI	ton, Prisci	LLA		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP				STREE			MIYON, PRISCILLA 1528 27 TH STREET ST RUSKIN FL 33570					i I
TITLE	VP		Delete TITLE				VP DX Change					Addition
NAME STREET ADDRESS	HITE, BOI 128 27 ST	NNIE FREET SOUTHEAST	NAM			E ET ADDRESS	MILLIS, TINA 1528 272 STREET SE					
CITY-ST-ZIP						-ST-ZIP	R	USKIN F	L 33570)		
TITLE ~ NAME	T WREN, D	ARMON	-	Delete	TITLE NAM	F der	100	There's local	reich	1	Change Change	Addition
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CITY-ST-ZIP	S RUSKIU,	FL 33570		⊠ Delete	TITLE		<u></u>	אואני	C 3 >5 /		Change Ch	☐ Addition
NAME STREET ADDRESS	· ·	CLAUDENE FREET SOUTHEAST		`	NAM	E ET ADDRESS	HIM	DERLITER	DONALO	· <=		
CITY-ST-ZIP		FL 33570				-ST-ZIP	15	LUSKIN F	5 Thee F	0		
TITLE NAME	D WRIGHT,			☑ Delete	TITLI	l l	٥	C TIM			Change	Addition
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CITY-ST-ZIP	-	FL 33570		⊠ Delete	TITLE	-ST-ZIP		USKIN F			◯ Change	Addition
NAME .	BRUNO,	CHARLIE			NAM		M	AY, APRIL	CTILDUT SE	-		.)
STREET ADDRESS CITY-ST-ZIP	ľ	STREET SOUTHEAST FL 33570				ET ADDRESS -ST-ZIP		1AY, APRIL 28 27 B S EUSKING I	FL 3350	0		
12. Thereby certify that the information supplied with this filling does not qualify for the exemption state of in Section 1.9.07(3)(f), Floridal Statutes, for a 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: WW Studen I DOWARD L. HINDERLYTEN, SECRETARY, 633-2903 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DIFFICER OR DIRECTOR Date Dayline Priore #												