PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. ORIDA DEPARTMENT OF STATE 03 JAN 28 PM 12: 39 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name 2. Principal Office Address 3. Mailing Office Address Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified To Do Business in Florida OCT 30 2000 City & State City & State 5. FEI Number Applied For Flonda Not Applicable Ζip Country \$8.75, Additional Fee required CERTIFICATE OF STATUS DESIRED Hillsborough for a Certificate of Status 7. Name and Address of Current Registered Agent Namo 500011141285 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City WSKIN 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Titles Street Address of Each Officers and/or Directors City / State / Zip Officer and/or Director 10. Certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling his reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an examption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. Damon SIGNATURE: Wren SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



C.A.R.E. Inc.

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P. O. Box 926 · Ruskin, FL 33575 · (813) 645-CARE · Fax: (813) 645-4022 1528 27th Street South East · Ruskin, FL 33570 E-mail: care_shelter@juno.com · Web-Site: careshelter.org

January 08,2003

Department of State Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

To Whom It May Concern:

Please be advised that we did not receive our renewal of Certificate of Incorporation in 2002. Please find enclosed Corporation Reinstatement and our check for 2 years (2002 and 2003 along with Certificate of Status desired).

Old Address: 3118 Long rifle Drive Wimauma, Fl 33598

NEW ADDRESS 1528 27th Street Southeast Ruskin, FI 33570

Please also find attached 2 additional Directors.

Thank you.

Sincerely,

Susan E. Rondon Executive Director

Board of Directors

President
Hal Ott, DVM
Vice President
Bonnie Hite
Treasurer
Damon Wren
Secretary
Priscilla Mixon
Lisa Wright
Dr. Leslie Elliott, DVM
Dr. Carolyn Schlede, M.D.
Executive Director
Susan Rondon

Advisory Board

Sheila Burdick
American Bank
Dr. Bob Encinosa
Boyette Animal Hospital
Spencer Faircloth
Sun Trust Bank
Dr. Steve Fox
Fox & Friends Animal Hospital
Nancy Hubbell
Attorney
Bob Hite
News Channel 8
Dr. Bill Kyser
Veterinarian

Dr. Bill Kyser
Veterinarian
Linda Parker
Tampa Humane Society
Dr. Katie Thompson
Boyette Animal Hospital

Stephen A. Updegraff, M.D. Updegraff Lasik Vision



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Board of Directors

President Hal Ott, DVM Vice President Bonnie Hite Treasurer Damon Wren Secretary Priscilla Mixon Lisa Wright Dr. Leslie Elliott, DVM Dr. Carolyn Schlede, M.D. Executive Director Susan Rondon

Advisory Board

Sheila Burdick American Bank Dr. Bob Encinosa Boyette Animal Hospital Spencer Faircloth Sun Trust Bank Dr. Steve Fox Fox & Friends Animal Hospital Nancy Hubbell Attorney Bob Hite News Channel 8 Dr. Bill Kyser Veterinarian Linda Parker Tampa Humane Society Dr. Katie Thompson Boyette Animal Hospital

Stephen A. Updegraff, M.D. Updegraff Lasik Vision

ADDITIONAL DIRECTORS (two)

D 1528 27th Street Southeast Priscilla Mixon Ruskin, Fl 33570 Dr. Carolyn Schlede 1528 27th Street Southeast D Ruskin, fl 33570