

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00900

1. Entity Name

FRIENDS OF PETS, INC.

Principal Place of Business

P.O. BOX 451
EDGEWATER FL 32132

Mailing Address

P.O. BOX 451
EDGEWATER FL 32132

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2438282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROCHE, VIRGINIA H.
1422 S RIVERSIDE DR
NEW SMYRNA BEACH FL 32168

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WAEGER, AUDREY
4609 KABY DRIVE
NEW SMYRNA BEACH FL 32168 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Patty Moody
-337 Schooner-Edgewater, FL
Zip: 32141 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
ROCHE, VIRGINIA H
1422 S RIVERSIDE DRIVE
NEW SMYRNA BEACH FL 32168 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1st V. Pres.
Virginia Roche
1422 S. Riverside-Dr.-New Smyrna Beach, FL.
Zip: 32168 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
WATERBURY, BARBARA
2103 SABEL PALM DR.
EDGEWATER FL 32141 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2nd V. Pres.
Rosemary Stirling
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CORNELIUS, PATRICIA L
4580 LAKE JAMES CIR
EDGEWATER FL 32141 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Barbara Dion
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2VP
VIRGIN, GAYLE L
2103 SABAL PALM DR
EDGEWATER FL 32141 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Carol Lutz
-2008 Limetree Dr., Edgewater
Zip: 32132 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
RAY, FRANCES
49 FORE DR
NEW SMYRNA BCH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-01

904-409-0467

Date

Daytime Phone #

CR2E037 (10/00)