## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000000250

City-St-Zip: PENSACOLA, FL 32505

Entity Name: ANIMAL HELPERS OF N.W. FL. INC

FILED Apr 13, 2009 Secretary of State

Entity Na	me: ANIMAL F	IELPERS OF N.VV. FL, INC.				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
3603 MOH	IILE HWY		3603 MOB	3603 MOBILE HWY		
#B	DLA, FL 32505		#B	#B PENSACOLA, FL 32505		
				New Mailing Address:		
Current IV	lailing Addres	S:	New Maili			
PO BOX 3 PENSACC	6333 DLA, FL 32516					
FEI Number: 59-3712194 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )				
Name and	l Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
MELEI, ST 3603 MOB PENSACC		US				
	e named entity s e of Florida.	ubmits this statement for the	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
OFFICER	S AND DIREC	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DPT () MELEI, STEVEN 3603 MOBILE H PENSACOLA, F	WY.	Title: Name: Address: City-St-Zip:	,	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DV () BLAKENEY, SH 8314 GARDENI, PENSACOLA, F	A CIR.	Title: Name: Address: City-St-Zip:	DV MELEI, SHAN 3603 MOBILI PENSACOLA	E HWY	
Title: Name: Address: City-St-Zip:	D () HAHN, NEIL 3512 W. JACKS PENSACOLA, F		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () MELEI, JOSEPH 815 KIRK ST. PENSACOLA, F		Title: Name: Address: City-St-Zip:	D MELEI, MARG 203 SEMINO PENSACOLA	LE TRAIL	
Title: Name: Address:	D () MELEI, JOSEPH 1022 N. R. STRE		Title: Name:	D MELEI, JOSE		

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.

City-St-Zip: PENSACOLA, FL 32506

SIGNATURE: STEVEN E. MELEI PRES 04/13/2009