

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000250

FILED  
Apr 26, 2012  
Secretary of State

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

**Current Principal Place of Business:**

3603 MOBILE HWY  
#B  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

3603 MOBILE HWY  
#B  
PENSACOLA, FL 32505

**New Mailing Address:**

**FEI Number:** 59-3712194

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MELEI, STEVEN E  
3603 MOBILE HWY  
PENSACOLA, FL 32505 US

**Name and Address of New Registered Agent:**

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:**

Title: DPT  
Name: MELEI, STEVEN  
Address: 3603 MOBILE HWY.  
City-St-Zip: PENSACOLA, FL 32505

Title: DV  
Name: MELEI, SHANDI  
Address: 3603 MOBILE HWY  
City-St-Zip: PENSACOLA, FL 32505

Title: D  
Name: HAHN, NEIL  
Address: 3512 W. JACKSON ST.  
City-St-Zip: PENSACOLA, FL 32505

Title: D  
Name: MELEI, MARGIE R  
Address: 203 SEMINOLE TRAIL  
City-St-Zip: PENSACOLA, FL 32506

Title: D  
Name: MELEI, JOSEPH E II  
Address: 204 SEMINOLE TRAIL  
City-St-Zip: PENSACOLA, FL 32506

I hereby 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 all other like empowered.

SIGNATURE: STEVEN E. MELEI

PRES

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date