

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000001156

FILED
Jan 09, 2007
Secretary of State

Entity Name: THERAPY DOG FOUNDATION, INC.

Current Principal Place of Business:

9235 LAGOON PLACE STE 216
FORT LAUDERDALE, FL 33324

New Principal Place of Business:

6013 NW 23RD AVENUE
BOCA RATON, FL 33496

Current Mailing Address:

9235 LAGOON PLACE STE 216
FORT LAUDERDALE, FL 33324

New Mailing Address:

6013 NW 23RD AVENUE
BOCA RATON, FL 33496

FEI Number: 65-1098236 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POLLER, JERI
6013 NW 23 AVE
BOCA RATON, FL 33496 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: JERI POLLER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUNT-HOFFMAN, LYNN
Address: 240 NW 9TH STREET
City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete
Name: COLE, SANDEE
Address: 9235 LAGOON PLACE
City-St-Zip: FT. LAUDERDALE, FL 33324

Title: DVP () Delete
Name: ENGMAN, KATHY
Address: 22551 GROUPE COURT
City-St-Zip: BOCA RATON, FL 33428

Title: DVP () Delete
Name: PRINSTEIN, IRENE
Address: 5224 BOLERO CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

Title: DVP () Delete
Name: ADELMAN, CAROL
Address: 6125 NW 23 TERRACE
City-St-Zip: BOCA RATON, FL 33496

Title: DVP () Delete
Name: BROWN, BRENDA
Address: 115 W. PLUMISA LANE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: COLE, SANDEE
Address: 1844 DALTON DRIVE
City-St-Zip: THE VILLAGES, FL 32162

Title: DT (X) Change () Addition
Name: POLLER, JERI
Address: 6013 NW 23RD AVENUE
City-St-Zip: BOCA RATON, FL 33496

Title: D (X) Change () Addition
Name: PRINSTEIN, IRENE
Address: 5224 BOLERO CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: JERI POLLER

Electronic Signature of Signing Officer or Director

DT

01/09/2007

Date