## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001156

FILED Jan 05, 2012 Secretary of State

Entity Name: THERAPY DOG FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6013 NW 23RD AVENUE BOCA RATON, FL 33496

Current Mailing Address: 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 ( )

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

POLLER, JERI 6013 NW 23 AVE

BOCA RATON, FL 33496 US

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: PD

 Name:
 HUNT-HOFFMAN, LYNN

 Address:
 240 NW 9TH STREET

 City-St-Zip:
 BOCA RATON, FL 33432

Title: SD

 Name:
 COLE, SANDEE

 Address:
 1844 DALTON DRIVE

 City-St-Zip:
 THE VILLAGES, FL 32162

Title: DT

 Name:
 POLLER, JERI

 Address:
 6013 NW 23RD AVENUE

 City-St-Zip:
 BOCA RATON, FL 33496

Title:

 Name:
 PRINSTEIN, IRENE

 Address:
 5224 BOLERO CIRCLE

 City-St-Zip:
 DELRAY BEACH, FL 33484

Title: DVP

 Name:
 ADELMAN, CAROL

 Address:
 6125 NW 23 TERRACE

 City-St-Zip:
 BOCA RATON, FL 33496

Title: DVP

Name: BROWN, BRENDA
Address: 115 W. PLUMISA LANE
City-St-Zip: LAKE WORTH, FL 33467

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: JERI POLLER DT 01/05/2012