


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90179 017 ****61.25

DOCUMENT # N01000002494 1. Entity Name HUMANE SOCIETY OF VERO BEACH AND INDIAN RIVER COUNTY, FL FOUNDATION, INC.	
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Principal Place of Business 6230 77TH ST VERO BEACH, FL 32967	Mailing Address PO BOX 644 VERO BEACH, FL 32961
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MCDONOUGH, WAYNE R 1901 25TH STREET VERO BEACH, FL 32960	DO NOT WRITE IN THIS SPACE
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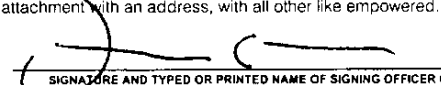
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SWIFT, MACY 6230 77TH ST VERO BEACH, FL 32967	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCDEVITT, TOM 6230 77TH ST VERO BEACH, FL 32967	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WESTBROOK, KATHY 1955 3RD ST VERO BEACH, FL 32962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWERIN, VIRGINIA 6230 77TH ST VERO BEACH, FL 32967	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OBERKOTTER, HAL 6230 77TH ST VERO BEACH, FL 32967	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC EVANS, JOHN H 221 SANDPIPER PT. VERO BEACH, FL 32963	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Thomas E. McDevitt**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4/11/07** Daytime Phone #: **772-388-3826**