

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002494

FILED  
Feb 09, 2012  
Secretary of State

**Entity Name:** HUMANE SOCIETY OF VERO BEACH AND INDIAN RIVER COUNTY, FL FOUNDATION, INC.

**Current Principal Place of Business:**

6230 77TH ST  
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 644  
VERO BEACH, FL 32961

**New Mailing Address:**

**FEI Number:** 59-3729687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EMMONS, REBECCA F  
3355 OCEAN DR.  
VERO BEACH, FL 32963 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: D  
Name: CROWELL, R. PARKER JR  
Address: 6230 77TH ST  
City-St-Zip: VERO BEACH, FL 32967

Title: VC  
Name: OBERKOTTER, HAROLD JR  
Address: 6230 77TH ST  
City-St-Zip: VERO BEACH, FL 32967

Title: S  
Name: SPITZMILLER, FRANK  
Address: 6230 77TH ST  
City-St-Zip: VERO BEACH, FL 32967

Title: C  
Name: SCHWERIN, VIRGINIA  
Address: 6230 77TH ST  
City-St-Zip: VERO BEACH, FL 32967

Title: D  
Name: BECKER, JO ANN  
Address: 6230 77TH ST  
City-St-Zip: VERO BEACH, FL 32967

Title: T  
Name: HUDSON, WILLIAM  
Address: 6230 77TH ST  
City-St-Zip: VERO BEACH, FL 32967

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: CHALMERS I. MORSE

CEO

02/09/2012

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

\_\_\_\_\_  
Date