2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 04, 2006
Secretary of State

DOCUMENT# N01000003409

Entity Name: KOWIACHOBEE ANIMAL PRESERVE INC.

Current Principal Place of Business:

2861 4TH AVENUE S.E.
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

2861 4TH AVENUE S.E.
NAPLES, FL 34117

New Mailing Address:

FEI Number: 65-1094409 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RUE, GRACELYN M
2861 4TH AVENUE S.E.
NAPLES, FL 34117 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 ( ) Delete
Name: KOZLOW, DAN
Address: 6015 GREEN BLVD
City-St-Zip: NAPLES, FL 34116

Title: D ( ) Delete
Name: SLABY, JONATHAN P
Address: 2861 4TH AVENUE S.E.
City-St-Zip: NAPLES, FL 34117

Title: D ( ) Delete
Name: MOSTACCIO-RUE, GRACELYN
Address: 2861 4TH AVE SE
City-St-Zip: NAPLES, FL 34117

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D ( ) Change (X) Addition
Name: RINEHART, PAMELA G
Address: 4496 30TH PLACE SW
City-St-Zip: NAPLES, FL 34116

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: GRACELYN MOSTACCIO RUE D 08/04/2006

Electronic Signature of Signing Officer or Director — Date