

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005674

FILED
Apr 29, 2004
Secretary of State**Entity Name:** EARS - ENDANGERED ANIMAL RESCUE SANCTUARY, INC.**Current Principal Place of Business:**2615 E. HWY. 318
CITRA, FL 32113**New Principal Place of Business:****Current Mailing Address:**P.O BOX 159
CITRA, FL 32113**New Mailing Address:****FEI Number:** 59-3741622**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PERRETT, JAYE
2615 E. HWY. 318
CITRA, FL 32113**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:** PD () Delete
Name: PERRETT, JAYE
Address: 2615 E HWY 318
City-St-Zip: CITRA, FL 32113**Title:** VPD () Delete
Name: BOWEN, GAIL A
Address: 2615 E HWY 318
City-St-Zip: CITRA, FL 32113**Title:** STD () Delete
Name: BOWEN, CHRISTINA
Address: 2615 E HWY 318
City-St-Zip: CITRA, FL 32113**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAYE PERRETT

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date