2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 15, 2009
Secretary of State

DOCUMENT# N01000005674

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 306
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 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: 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

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

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: NASSIVERA, SUE
Address: 2250 NE 70TH STREET
City-St-Zip: OCALA, FL 34479 US

Title: D ( ) Change (X) Addition
Name: CARBAUGH, MARSHA
Address: 8477 NW 115TH AVENUE
City-St-Zip: OCALA, FL 34482 US

I hereby certify that the information supplied with this filing does not qualify 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: JAYE PERRETT PD 07/15/2009

Electronic Signature of Signing Officer or Director — Date