

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006006

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** CHIHUAHUA - TOY BREED RESCUE AND RETIREMENT, INC.

**Current Principal Place of Business:**

POSTOFFICE BOX # 245906  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

6145 CR 28  
LAFAYETTE, AL 36832 US

**New Mailing Address:**

FEI Number: 65-1136239

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DE POMPA, MARY  
POSTOFFICE BOX # 245906  
PEMBROKE PINES, FL 33024 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  
Name: DE POMPA, NICHOLAS L  
Address: 6145 COUNTY ROAD 28  
City-St-Zip: LAFAYETTE, AL 36862

Title: VD  
Name: CARTER, SUSIE  
Address: 1031 GREENBOW LANE  
City-St-Zip: WAKE FOREST, NC 27587

Title: SD  
Name: POMPA, MARY D  
Address: 6145 COUNTY ROAD 28  
City-St-Zip: LAFAYETTE, AL 36862

Title: TD  
Name: DE POMPA, SERENA  
Address: 6145 COUNTY ROAD 28  
City-St-Zip: LAFAYETTE, AL 36862

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: SERENA DE POMPA

TD

04/19/2011

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

\_\_\_\_\_  
Date