

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008266

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: NO MORE HOMELESS PETS, INC.

## Current Principal Place of Business:

210 NW 79TH DRIVE  
GAINESVILLE, FL 32607

## New Principal Place of Business:

6904 SW 35TH WAY  
GAINESVILLE, FL 32608

## Current Mailing Address:

PO BOX 141023  
GAINESVILLE, FL 32614

## New Mailing Address:

FEI Number: 02-0536968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TUCKER, SYLVIA  
2290 SE 193 CT  
MORRISTON, FL 32668 US

## Name and Address of New Registered Agent:

SMITH, DALE C  
6904 SW 35TH WAY  
GAINESVILLE, FL 32608 US

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: DALE C. SMITH

03/17/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LEVY, JULIE  
Address: PO BOX 100126  
City-St-Zip: GAINESVILLE, FL 32610

Title: VD ( ) Delete  
Name: FRIARY, JOHN  
Address: 999 SW 16TH AVE  
City-St-Zip: GAINESVILLE, FL 32601

Title: SD ( ) Delete  
Name: SCOTT, KAREN  
Address: 444 NW 26TH AVE  
City-St-Zip: GAINESVILLE, FL 32609

Title: TD ( ) Delete  
Name: TUCKER, SYLVIA  
Address: 2290 SE 193 CT  
City-St-Zip: MORRISTON, FL 32668

Title: D (X) Delete  
Name: RYAN, BOB  
Address: 120 SW 154 ST  
City-St-Zip: NEWBERRY, FL 32669

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LEVY, JULIE  
Address: PO BOX 141023  
City-St-Zip: GAINESVILLE, FL 32614

Title: VD (X) Change ( ) Addition  
Name: RICHMOND, SANDI  
Address: 22353 S. HIGHWAY 441  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: SD (X) Change ( ) Addition  
Name: HUTCHINSON, ROBERT K  
Address: 3218 SE 27TH STREET  
City-St-Zip: GAINESVILLE, FL 32641

Title: TD (X) Change ( ) Addition  
Name: KAPLAN-STEIN, DALE  
Address: 12801 NW 56TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32653

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

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: JULIE LEVY

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date