

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008290

FILED
Apr 11, 2011
Secretary of State

Entity Name: PROTECTORS OF COMPANION ANIMALS, INC.

Current Principal Place of Business:

120 N FAIRFAX AVE
WINTER SPRINGS, FL 327082533 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 181176
CASSELBERRY, FL 327181176 US

New Mailing Address:

FEI Number: 59-3760425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WADE, GLORIA E PRES.
120 N FAIRFAX AVE
WINTER SPRINGS, FL 327082533 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: WESTERVELD, DANIELA SHEILA PRES.
Address: 3412 SANTA MONICA DRIVE
City-St-Zip: ORLANDO, FL 32822 US

Title: TD
Name: YAO, OLIVER J TRES.
Address: 764 GALWAY BLVD.
City-St-Zip: APOPKA, FL 32703 US

Title: DIR
Name: WADE, GLORIA
Address: 120 NORTH FAIRFAX AVE.
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: D
Name: SCHIRTZER, MARSHALL
Address: 136 NORRIS PLACE
City-St-Zip: CASSELBERRY, FL 32707

Title: D
Name: KILLORAN, LAURIE
Address: 3499 MEDFORD RD.
City-St-Zip: CASSELBERRY, FL 32707

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: DANIELA SHEILA WESTERVELD

PRES

04/11/2011

Electronic Signature of Signing Officer or Director

Date