2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001479

FILED Jan 27, 2005 Secretary of State

Entity Name: ANIMAL COMPASSION PROJECT, INC. **Current Principal Place of Business: New Principal Place of Business:** 7620 ROOKERY LANE NAPLES, FL 34120 **Current Mailing Address: New Mailing Address:** 7620 ROOKERY LANE NAPLES, FL 34120 FEI Number: 03-0409650 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANTONIA, MICHELE 7620 ROÓKERY LANE NAPLES, FL 34120 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ANTONIA, MICHELE Name: Name: Address: 7620 ROOKERY LANE Address: City-St-Zip: NAPLES, FL 34120 City-St-Zip: Title: VPD Title: () Delete () Change () Addition Name: BLAND, TINA Name: Address: 1097 BLUEBIRD ST. Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: Title: () Delete Title: (X) Change () Addition COOMBS, MARY Name: HOLLANDER, CAROL Name: Address: 2430 CATAWBA Address: 470 LOGAN BLVD, S. City-St-Zip: NAPLES, FL 34120 City-St-Zip: NAPLES, FL 34119

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: MICHELE ANTONIA PRES 01/27/2005