

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001479

FILED
Jan 22, 2009
Secretary of State

Entity Name: ANIMAL COMPASSION PROJECT, INC.

Current Principal Place of Business:

7620 ROOKERY LANE
NAPLES, FL 34120 US

New Principal Place of Business:

Current Mailing Address:

7620 ROOKERY LANE
NAPLES, FL 34120 US

New Mailing Address:

FEI Number: 03-0409650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANTONIA, MICHELE
7620 ROOKERY LANE
NAPLES, FL 34120 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: ANTONIA, MICHELE
Address: 7620 ROOKERY LANE
City-St-Zip: NAPLES, FL 34120

Title: VPD () Delete
Name: BLAND, TINA
Address: 1097 BLUEBIRD ST.
City-St-Zip: NAPLES, FL 34104

Title: SD () Delete
Name: DILLON, DANIELLE
Address: P. O. BOX 8474
City-St-Zip: NAPLES, FL 34101

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:

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: MICHELE ANTONIA

PD

01/22/2009

Electronic Signature of Signing Officer or Director

Date