

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003079

FILED
Feb 03, 2009
Secretary of State

Entity Name: ALL THE BUNNIES FOUNDATION, INC.

Current Principal Place of Business:

328 N RHODES AVENUE
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

328 N RHODES AVENUE
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 01-0678905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIESNER, IRA S
328 N. RHODES AVENUE
SARASOTA, FL 34237 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: D () Delete
Name: WIESNER, IRA S
Address: 328 N. RHODES AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: WIESNER, DONNA T
Address: 328 N RHODES AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: OSTERHOUT, JULIANNA
Address: 3783 SEAGO LANE
City-St-Zip: FT. MYERS, FL 33901

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: IRA S. WIESNER

D

02/03/2009

Electronic Signature of Signing Officer or Director

Date