


**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 06, 2003 8:00 am**  
**Secretary of State**

05-27-2003 90176 019 \*\*\*\*70.00

<b>DOCUMENT #</b> <i>NO2000004082</i>	
<b>1. Entity Name</b> <b>Rescuing Unwanted Friendly Fidos Inc.</b>	

**DO NOT WRITE IN THIS SPACE**

**55053467**

<b>2. Principal Place of Business</b> <b>8723 N. Temple Ave.</b>	<b>3. Mailing Address</b> <b>8723 N. Temple Ave.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

<b>City &amp; State</b> <b>Tampa, FL</b>	<b>City &amp; State</b> <b>Tampa, FL</b>	<b>4. FEI Number</b> <b>75-3062410</b>	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>Zip</b> <b>33617</b>	<b>Country</b> <b>U.S.</b>	<b>Zip</b> <b>33617</b>	<b>Country</b> <b>U.S.</b>
		<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

<b>Name</b> <b>Pamela Vandenburg</b>
<b>Street Address (P.O. Box Number is Not Acceptable)</b> <b>8723 N. Temple Ave.</b>
<b>City</b> <b>Tampa</b> <b>FL</b> <b>Zip Code</b> <b>33617</b>

**8. 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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ **DATE** \_\_\_\_\_

**FEE IS \$61.25**  
**Initial or Amended UBR**

**9. Election Campaign Financing**  
**Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees**

**Make Check Payable to**  
**Florida Department of State**

<b>10. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>President, Pamela Vandenburg - D</b> <b>8723 N. Temple Ave.</b> <b>Tampa, FL 33617</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>Vice President, Kelley Curtis - T</b> <b>6815 N. Central Ave.</b> <b>Tampa, FL 33604</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>Amy Barnett, Secretary - T</b> <b>8723 N. Temple Ave.</b> <b>Tampa, FL 33617</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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**12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** *Pamela Vandenburg*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Date**

**Daytime Phone #**

CR2E037B (12/02)

Attachment

55053467  
#N02000004082

payment previously  
submitted.

Corrections made  
per letter dated  
7/7/03.