# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 01, 2006**
**Secretary of State**

DOCUMENT# N02000006660

**Entity Name:** GREENMAN'S GLEN ANIMAL SANCTUARY INC.

**Current Principal Place of Business:**

12470 KITTIWAKE RD
BROOKSVILLE, FL 34614

**New Principal Place of Business:**

**Current Mailing Address:**

12470 KITTIWAKE RD
BROOKSVILLE, FL 34614

**New Mailing Address:**

**FEI Number: 56-2290318** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

**Name and Address of Current Registered Agent:**

MALONE, MARY A
12470 KITTIWAKE RD
BROOKSVILLE, FL FL 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: PST ( ) Delete
Name: MALONE, MARY A
Address: 12470 KTTIWAKE RD
City-St-Zip: BROOKSVILLE, FL 34614

Title: TS ( ) Delete
Name: GUTKNECHT, EARL
Address: 8376 BLACKSTONE ST
City-St-Zip: SPRING HILL, FL 34608

Title: D ( ) Delete
Name: BADIUKIEWICZ, HENRY
Address: 12470 KITTIWAKE RD
City-St-Zip: BROOKSVILLE, FL 34614

Title: D ( ) Delete
Name: DUPREE, JEFFREY
Address: 12470 KITTIWAKE RD
City-St-Zip: BROOKSVILLE, FL 34614

Title: VP ( ) Delete
Name: WARD, JESSICA
Address: 6198 S.W. 91ST WAY
City-St-Zip: BUSHNELL, FL 33513

**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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: WEISMANN, MARY P
Address: 3227 LANDOVER BLVD
City-St-Zip: SPRING HILL, FL 34608

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY A MALONE PST 07/01/2006
Electronic Signature of Signing Officer or Director — Date