

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 20, 2010
Secretary of State

Entity Name: G.R.E.A.T. RESCUE OF NE FLORIDA INC.

Current Principal Place of Business:

2424 HAWKCREST DR E
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

2424 HAWKCREST DR E
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 56-2299671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JUDITH A
2424 HAWKCREST DR E
JACKSONVILLE, FL 32259 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: DP
Name: BROWN, JUDITH A
Address: 2424 HAWKCREST DR E
City-St-Zip: JACKSONVILLE, FL 32259

Title: DT
Name: BROWN, REED E
Address: 2424 HAWKCREST DR E
City-St-Zip: JACKSONVILLE, FL 32259

Title: D
Name: VAN ABS, SUSAN
Address: 5260 CLUSTER OAKS CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: SD
Name: SCARBOROUGH, SHERI
Address: 8664 ROLLING BROOK LANE
City-St-Zip: JACKSONVILLE, FL 32256

Title: DVP
Name: KOHLBECK, KATHY
Address: 196 PRINCE PHILLIP DR
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D
Name: KLUBA, KRISTI
Address: 2420 HAWKCREST DR E
City-St-Zip: JACKSONVILLE, FL 32259

I hereby 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 all other like empowered.

SIGNATURE: JUDITH A BROWN

PRES

01/20/2010

Electronic Signature of Signing Officer or Director

Date