


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 10, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N02000009247</b> 1. Entity Name <b>USELESS ANIMAL FARM SANCTUARY INC.</b>	
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Principal Place of Business <b>7451 CRILL AVENUE PALATKA, FL 32177</b>	Mailing Address <b>7451 CRILL AVENUE PALATKA, FL 32177</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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03062008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>90-0064948</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>SPEAR, ROSEMARY B 7451 CRILL AVENUE PALATKA, FL 32177</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 <u><i>Rosemary B Spear</i></u> <b>3-6-08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reelecting)</small> DATE
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<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPEAR, ROSEMARY B 7451 CRILL AVENUE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SPEAR, LARRY W 7451 CRILL AVENUE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRADLEY, ROSEMARY 143 LATESHA TERRACE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CANADY, TERRI 325 SISCO DIRT ROAD SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM CANADY, TONY 325 SISCO DIRT ROAD SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM HARNACK, SHERI 108 CEDAR CREEK ROAD PALATKA, FL 32177

<p>U000000852794 03/26/08-80043-022 61.25</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.  SIGNATURE: <u><i>Rosemary B Spear</i></u> <b>3-6-08</b> <b>386-325- Pres. 6289</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>
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