2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N04000000480

Entity Name: KINDRED SPIRITS SANCTUARY, INC.

Current Principal Place of Business:

12600 N HWY 27
OCALA, FL 34482

New Principal Place of Business:

Current Mailing Address:

12600 N HWY 27
OCALA, FL 34482

New Mailing Address:

FEI Number: 20-0712233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRAHIM, LAURA M EX DIR
12600 N HWY 27
OCALA, FL 34482 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:	BRAHIM, LAURA M EX DIR	
Address:	12600 N HWY 27	
City-St-Zip:	OCALA, FL 34482	
Title:	D	(X) Delete
Name:	GIFFORD, HEATHER	
Address:	5101 SE 11TH AVENUE	
City-St-Zip:	OCALA, FL 34480	
Title:	D	( ) Delete
Name:	BILLS, CELIA	
Address:	1507 SE 14TH STREET	
City-St-Zip:	OCALA, FL 34471	
Title:	D	( ) Delete
Name:	NELSON, LAURA	
Address:	13303 W HWY 40	
City-St-Zip:	OCALA, FL 34481	
Title:	D	( ) Delete
Name:	VINDETT, TONY	
Address:	5721 NW 60TH TERRACE	
City-St-Zip:	OCALA, FL 34482	

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:	( ) 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: LAURA BRAHIM EX D 01/16/2009

Electronic Signature of Signing Officer or Director — Date