

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 21, 2011**  
**Secretary of State**

DOCUMENT# N04000003258

**Entity Name:** SANCTUARY ANIMAL REFUGE, INC.**Current Principal Place of Business:**9550 CARLTON ROAD  
PORT ST LUCIE, FL 34987**New Principal Place of Business:****Current Mailing Address:**9550 CARLTON ROAD  
PORT ST LUCIE, FL 34987**New Mailing Address:****FEI Number:** 20-0957728**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DORSEY, PALENA  
5746 CLYDESDALE LANE  
FORT PIERCE, FL 34987 US**Name and Address of New Registered Agent:**INCORP SERVICES, INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

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:** LISA GRANSKIE

04/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D  
**Name:** GALLAGHER, KATHRYN  
**Address:** 9550 CARLTON ROAD  
**City-St-Zip:** FORT PIERCE, FL 34987**Title:** D  
**Name:** JENSEN, KEVIN  
**Address:** 9550 CARLTON ROAD  
**City-St-Zip:** PORT ST LUCIE, FL 34987**Title:** D  
**Name:** CAVACO, TINA  
**Address:** 9550 CARLTON ROAD  
**City-St-Zip:** PORT ST LUCIE, FL 34987

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:** KEVIN JENSEN

D

04/21/2011

Electronic Signature of Signing Officer or Director

Date