2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2007
Secretary of State

DOCUMENT# N04000005704

Entity Name: LOST WOLF RESCUE, INC.

Current Principal Place of Business:

2608 SECOND AVENUE NORTH
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

2608 SECOND AVENUE NORTH
ST. PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 34-1997230 **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:

STRINKA, JOANNE
2608 SECOND AVENUE NORTH
ST. PETERSBURG, FL 33713 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: P ( ) Delete
Name: STRINKA, JOANNE
Address: 2608 2ND AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

Title: VP ( ) Delete
Name: BROWN, ERIC
Address: 144 147TH AVENUE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: D ( ) Delete
Name: GORR-BROWN, KATE
Address: 144 147TH AVENUE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D ( ) Change (X) Addition
Name: LITTLE, COLLEEN A
Address: 2608 2ND AVE NO
City-St-Zip: ST PETERSBURG, FL 33713

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: JOANNE STRINKA P 09/04/2007

Electronic Signature of Signing Officer or Director — Date