## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400006092

City-St-Zip: NAPLES, FL 34109

Entity Name: GOLDEN RESCUE IN NAPLES, INC.

FILED Feb 14, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
720 TURKEY OAK LANE NAPLES, FL 341088550				720 TURKEY OAK LANE NAPLES, FL 341088550 US		
Current Mailing Address:				New Mailing Address:		
720 TURKEY OAK LANE NAPLES, FL 341088550			720 TURKEY OAK LANE NAPLES, FL 341088550 US			
FEI Number: 20-1287704 FEI Number Applied For ( ) FEI Number			FEI Num	nber Not Applicable ( )		Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
GUISE, JERILYN L 5707 NW 68TH AVE TAMARAC, FL 34103 US				GUISE, JERILYN L 5707 NW 68TH AVE TAMARAC, FL 33321 US		
The above in the State		ıbmits this statement for the pur	pose of	changing it	s registered of	ffice or registered agent, or both,
SIGNATURE:						02/14/2009
	Electronic	Signature of Registered Agent	t			Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () E METRO, MARY E 720 TURKEY OA NAPLES, FL 341	K LANE		Title: Name: Address: City-St-Zip:	PD (X) METRO, MARY 720 TURKEY O NAPLES, FL 34	AK LANE
Title: Name: Address: City-St-Zip:	SD () DATILLO, JANET 926 CYPRESS D NAPLES, FL 341	R.		Title: Name: Address: City-St-Zip:	SD (X) SHUGART, DON 3028 WILKINSO SARASOTA, FL	ON RD
Title: Name: Address: City-St-Zip:	T ()E METRO, PATRIC 720 TURKEY OA NAPLES, FL 341	K LANE		Title: Name: Address: City-St-Zip:	T (X) METRO, PATRIO 720 TURKEY O NAPLES, FL 34	AK LANE
Title: Name: Address: City-St-Zip:	D () E HAY, LINC 2252 SHADOW L SARASOTA, FL			Title: Name: Address: City-St-Zip:	()	Change ( ) Addition
Title: Name:	D () [ PALMER, ALESIA			Title: Name:	( )	Change ( ) Addition

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.

City-St-Zip:

SIGNATURE: PATRICK METRO TREA 02/14/2009