

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000006127

FILED  
Aug 16, 2006  
Secretary of State

Entity Name: LUCKY ONES RESCUE, INC.

## Current Principal Place of Business:

PO BOX 8362  
TAMPA, FL 336748362

## New Principal Place of Business:

C/O 8728 N. PAWNEE AVE.  
TAMPA, FL 33617

## Current Mailing Address:

PO BOX 8362  
TAMPA, FL 336748362

## New Mailing Address:

C/O 8728 N. PAWNEE AVE.  
TAMPA, FL 33617

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
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:

CURTIS, KELLEY  
8728 N PAWNEE AVE  
TAMPA, FL 33617 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: KELLEY CURTIS

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CURTIS, KELLEY  
Address: 8728 N PAWNEE AVE  
City-St-Zip: TAMPA, FL 33617

Title: V ( ) Delete  
Name: YESH, JANET  
Address: 9210 MILLHOPPER RD  
City-St-Zip: GAINESVILLE, FL 326532849

Title: TS ( ) Delete  
Name: HOSE, LINDA  
Address: 502 E ELM STREET  
City-St-Zip: TAMPA, FL 33604

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLEY CURTIS

P

08/16/2006

Electronic Signature of Signing Officer or Director

Date