

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009050

**FILED**  
**Jan 25, 2012**  
**Secretary of State**

**Entity Name:** HUMANE SOCIETY OF FLORIDA, INC.

**Current Principal Place of Business:**

9211 S FLORIDA AVE  
FLORAL CITY, FL 33513 UN

**New Principal Place of Business:**

9211 S FLORIDA AVE  
FLORAL CITY, FL 34436

**Current Mailing Address:**

9211 S FLORIDA AVE  
FLORAL CITY, FL 33513 UN

**New Mailing Address:**

9211 S FLORIDA AVE  
FLORAL CITY, FL 33436

**FEI Number:** 20-1636853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GORTON, MARY JANE  
7250 E APRIL CT  
FLORAL CITY, FL 34436 US

**Name and Address of New Registered Agent:**

GORTON, MARY JANE  
9211 S FLORIDA AVE  
FLORAL CITY, FL 34436 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: MARY JANE GORTON

01/25/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: GORTON, MARY JANE  
Address: 9211 S FLORIDA AVE  
City-St-Zip: FLORAL CITY, FL 34436

Title: VTRD  
Name: WHITE, DORIS  
Address: 9211 S FLORIDA AVENUE  
City-St-Zip: FLORAL CITY, FL 34436

Title: S  
Name: MARSHALL, ANNMARIE  
Address: 9211 S FLORIDA AVENUE  
City-St-Zip: FLORAL CITY, FL 34436

Title: D  
Name: BRINSON, BONNIE  
Address: 9211 S FLORIDA AVE  
City-St-Zip: FLORAL CITY, FL 34436

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: DORIS WHITE

VTRD

01/25/2012

Electronic Signature of Signing Officer or Director

Date