

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009926

FILED
Jan 11, 2005
Secretary of State

Entity Name: ANIMAL ADVOCATES UNLIMITED, INC.

Current Principal Place of Business:

13619 3RD AVE EAST
BRADENTON, FL 34212

New Principal Place of Business:

Current Mailing Address:

13619 3RD AVE EAST
BRADENTON, FL 34212

New Mailing Address:

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

Name and Address of Current Registered Agent:

GRAHAM, CATHLEEN M
13619 3RD AVE EAST
BRADENTON, FL 34212 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: D () Delete
Name: GRAHAM, CATHLEEN
Address: 13619 3RD AVE EAST
City-St-Zip: BRADENTON, FL 34212

Title: D () Delete
Name: GRAHAM, LAURIE
Address: 13619 3RD AVE EAST
City-St-Zip: BRADENTON, FL 34212

Title: D () Delete
Name: WILOCOX, JENNIFER
Address: 2404 52ND AVE DRIVE WEST
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name: () Change () Addition
Address: () Change () Addition
City-St-Zip: () Change () Addition

Title: () Change () Addition
Name: () Change () Addition
Address: () Change () Addition
City-St-Zip: () Change () Addition

Title: D (X) Change () Addition
Name: WILOCOX, JENNIFER
Address: 13153 KINGS CROSSING DR.
City-St-Zip: GIBSONTOWN, FL 33534

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CATHLEEN GRAHAM

D

01/11/2005

Electronic Signature of Signing Officer or Director

Date