## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000009987

Entity Name: BOXER AID & RESCUE COALITION, INC.

FILED Sep 17, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2729 BALDWIN DR. SOUTH TALLAHASSEE, FL 32309 US

Current Mailing Address: New Mailing Address:

P.O. BOX 20172 2729 BALDWIN DR SOUTH TALLAHASSEE, FL 32316 US TALLAHASSEE, FL 32309

FEI Number: 20-1778434 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: Name and Address of New Registered Agent:

KELLY, JAKI MOTTA, TRULA

8857 IVEY ROAD 9361 STAR GATE WAY

JACKSONVILLE, FL 32216 US TALLAHASSEE, FL 32309 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: TRULA MOTTA 09/17/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 P
 ( X) Change ( ) Addition

 Name:
 KELLY, JAKI A
 Name:
 CHAPMAN, JENNIFER L

 Address:
 8857 IVEY RD.
 Address:
 2729 BALDWIN DRIVE SOUTH

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 TALLAHASSEE, FL 32309

Title: () Delete Title: (X) Change ( ) Addition GRAFFIUS-ASHCRAFT, KAREN Name: CHAPMAN, JENNIFER L Name: Address: 2729 BALDWIN DR. S. Address: 14126 RED HAWK ROAD City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32312

 $\label{eq:time_time_time_time_time} \mbox{Title:} \mbox{$V$} \mbox{$($)$ Delete} \mbox{$T$ itle:} \mbox{$T$ $($)$ Change $($)$ Addition}$ 

 Name:
 PENA, SUSAN
 Name:
 MOTTA, TRULA

 Address:
 101 N. MONROE ST., STE. 1090
 Address:
 9361 STAR GATE WAY

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 TALLAHASSEE, FL 32309

Title: ( ) Delete Title: (X) Change ( ) Addition Name: MORRISON, PATRICIA Name: REICHENBACH, COURTNEY 1233 SW SUMMERTIME WAY 5025 RIVERSIDE DRIVE Address: Address: City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: BRUNSWICK, GA 31520

Name: MASTERS, DESTINY Name: PENA, SUSAN

Address: 7524 BROOKLINE RD. Address: 594 OLD TUNG GROVE ROAD City-St-Zip: WESLEY CHAPEL, FL 33544 City-St-Zip: MONTICELLO, FL 32344

Title: D () Delete Title: D (X) Change () Addition

Name: MOTTA, TRULA Name: SHARP, REGINA

Address: 9361 STAR GATE WAY Address: 1814 SEDGEFIELD ROAD City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32317

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: JENNIFER L CHAPMAN P 09/17/2007