2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010621

Entity Name: PUREBREED RESCUE INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3057 DONATO DRIVE N JACKSONVILLE, FL 32226 US **Current Mailing Address: New Mailing Address:** 3057 DONATO DRIVE N PO BOX 54126 JACKSONVILLE, FL 32226 US JACKSONVILLE, FL 32245-412 US FEI Number: 20-1908125 FEI Number Applied For () FEI Number Not Applicable () 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: Name and Address of New Registered Agent: RUTLEDGE, BELYNDA H 3057 DONATO DRIVE N JACKSONVILLE, FL 32226 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RUTLEDGE, BELYNDA H Name: Name: 3057 DONATO DRIVE N Address: Address: City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: Title: () Delete Title: (X) Change () Addition RUTLEDGE, RYAN B Name: Name: SANTO, JOANNE Address: 3057 DONATO DRIVE N Address: PO BOX 951256 City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: LAKE MARY, FL 32795 US Title: () Delete Title: **TRES** () Change (X) Addition SOVIERO, CONNIE D Name: Name: Address: Address: 1979 FREDERICK SMALL ROAD City-St-Zip: City-St-Zip: JUPITER, FL 33458 Title: () Delete Title: SEC () Change (X) Addition Name: Name: DAVIS, JUDY D 1415-401 TIMBERLANE ROAD Address: Address: City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32312 Title: () Delete Title: () Change (X) Addition RUTLEDGE, RYAN B Name: Name: 3057 DONATO DRIVE N Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32226

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: BELYNDA RUTLEDGE PRES 05/01/2006