

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011513

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** HOUSERABBIT ADOPTION, RESCUE AND EDUCATION, INC.

**Current Principal Place of Business:**

1301 MEMORIAL DRIVE  
CORAL GABLES, FL 33124

**New Principal Place of Business:**

**Current Mailing Address:**

1301 MEMORIAL DRIVE  
CORAL GABLES, FL 33124

**New Mailing Address:**

**FEI Number:** 20-2408957

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BDB AGENT CO.  
5355 TOWN CENTER ROAD  
SUITE 900  
BOCA RATON, FL 33486 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: ED ( ) Delete  
Name: KREMPELS, DANA  
Address: 6960 SW 60TH TERRACE  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: JOHNSON, KEVIN  
Address: 6960 SW 60TH TERRACE  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: GOMEZ-KAIFER, MARIELLE  
Address: 3610 DURANGO STREET  
City-St-Zip: CORAL GABLES, FL 33134

**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 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: KEVIN JOHNSON

D

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date