

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003789

FILED
Feb 09, 2010
Secretary of State

Entity Name: HUMANE SOCIETY OF LEVY COUNTY, INC.

Current Principal Place of Business:

7051 NE 110TH AVE
BRONSON, FL 32621 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 678
BRONSON, FL 32621 US

New Mailing Address:

FEI Number: 20-2846763 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHENK JR., MICHAEL G
7051 NE 110TH AVE
BRONSON, FL 32621 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: T/D
Name: SCHENK, MICHAEL G JR.
Address: PO BOX 678
City-St-Zip: BRONSON, FL 32621 US

Title: D
Name: ESLER, DARLENE DVM
Address: PO BOX 678
City-St-Zip: BRONSON, FL 32621 US

Title: S/D
Name: ASBELL, CONNIE
Address: PO BOX 678
City-St-Zip: BRONSON, FL 32621 US

Title: D
Name: GILL, BECKY
Address: PO BOX 678
City-St-Zip: BRONSON, FL 32621 US

Title: P/D
Name: HAGAN, MICHELLE
Address: PO BOX 678
City-St-Zip: BRONSON, FL 32621 US

Title: D
Name: FLICKINGER, MARY
Address: PO BOX 678
City-St-Zip: BRONSON, FL 32621 US

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: MICHELLE HAGAN

P

02/09/2010

Electronic Signature of Signing Officer or Director

Date