2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004515

Entity Name: CENTRAL FLORIDA SAMOYED RESCUE, INC.

FILED Feb 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13535 BRISTLECONE CIRCLE 2403 COLLEGE HILL DRIVE

ORLANDO, FL 32828 BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

13535 BRISTLECONE CIRCLE 8205 PLEASANT LANE ORLANDO, FL 32828 RIVERVIEW, FL 33569

FEI Number: 20-2778707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TURBA, PATTI WYATT, LAWAYNE A
13535 BRISTLECONE CIRCLE 8205 PLEASANT LANE
ORLANDO, FL 32828 US RIVERVIEW, FL 33569 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: LAWAYNE A. WYATT 02/15/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 TURBA, PATTI
 Name:
 SEGERS, LAURA

 Address:
 13535 BRISTLECONE CIRCLE
 Address:
 2403 COLLEGE HILL

 City-St-Zip:
 ORLANDO, FL 32828
 City-St-Zip:
 BRANDON, FL 33511

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

Name: SEGERS, LAURA Name: TURBA, PATTI

Address: 2403 COLLEGE HILL DR Address: 13535 BRISTLECONE CIRCLE

City-St-Zip: BRANDON, FL 33511 City-St-Zip: ORLANDO, FL 32828

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

 Name:
 BRABSON, PAUL
 Name:

 Address:
 3838 STERLING STREET
 Address:

 City-St-Zip:
 COCOA, FL 32926
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 WYATT, LAWAYNE
 Name:

 Address:
 8205 PLEASANT LANE
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 WEST, CHERYL
 Name:

 Address:
 328 BRIDLE PATH
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707
 City-St-Zip:

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: LAWAYNE A. WYATT SECY 02/15/2007