

**2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 05, 2012  
Secretary of State**

DOCUMENT# N05000007230

**Entity Name:** DOBERMANN RESCUE OF LAKE PLACID, INC.

**Current Principal Place of Business:**

171 HILLSIDE DR.  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

**Current Mailing Address:**

171 HILLSIDE DR.  
LAKE PLACID, FL 33852

**New Mailing Address:**

**FEI Number:** 20-3105956      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

VELDHUIS, GARY B  
171 HILLSIDE DR.  
LAKE PLACID, FL 33852      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:** PD  
**Name:** VELDHUIS, GARY B  
**Address:** 171 HILLSIDE DR.  
**City-St-Zip:** LAKE PLACID, FL 33852

**Title:** D  
**Name:** VELDHUIS, VINCENT V  
**Address:** 1815 CALICO DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33415

**Title:** D  
**Name:** HALE, VALERIE  
**Address:** 12227 VALLEY ROAD  
**City-St-Zip:** CLERMONT, FL 34715 US

**Title:** D  
**Name:** O'MALLEY, DIANE  
**Address:** 15195 ANGUS ROAD  
**City-St-Zip:** POLK CITY, FL 33868 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: GARY B VELDHUIS

PD

01/05/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date