

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011497

FILED  
May 02, 2008  
Secretary of State

**Entity Name:** CITIZENS FOR HUMANE EDUCATION INC.

**Current Principal Place of Business:**

3349 PEORIA RD  
ORANGE PARK, FL 32065 US

**New Principal Place of Business:**

**Current Mailing Address:**

3349 PEORIA RD  
ORANGE PARK, FL 32065 US

**New Mailing Address:**

**FEI Number:** 42-1681420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
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:**

POWELL, PATRICIA A  
3349 PEORIA RD  
ORANGE PARK, FL 32065 US

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

POWELL, GIGI DIRECTO  
3349 PEORIA RD  
ORANGE PARK, FL 32065 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: GIGI POWELL

05/02/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: POWELL, PATRICIA A  
Address: 3349 PEORIA RD  
City-St-Zip: ORANGE PARK, FL 32065 US

Title: S ( ) Delete  
Name: DEVILLE, DONNA  
Address: 5694 CANVASBACK RD  
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: VP ( ) Delete  
Name: NEAL, STUART  
Address: 10519 WELLINGTON SPRINGS WAY  
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: T ( ) Delete  
Name: DEININGER, JACOB  
Address: 3807 LOGAN FERRY RD APT. A - 8  
City-St-Zip: PITTSBURG, PA 15239 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: POWELL, GIGI  
Address: 3349 PEORIA RD  
City-St-Zip: ORANGE PARK, FL 32065 US

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: GIGI POWELL

DIR

05/02/2008

Electronic Signature of Signing Officer or Director

Date