

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001235

FILED
May 01, 2008
Secretary of State

Entity Name: RAJAH'S RESCUE SANCTUARY & FOSTER INC.

Current Principal Place of Business:

5831 WEST US 27
MAYO, FL 32066

New Principal Place of Business:

Current Mailing Address:

5831 WEST US 27
MAYO, FL 32066

New Mailing Address:

FEI Number: 20-4252837 **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:

MCKINSTER, KAREN
5831 WEST US 27
MAYO, FL 32066 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: P () Delete
Name: MCKINSTER, KAREN
Address: 5831 WEST US 27
City-St-Zip: MAYO, FL 32066

Title: T () Delete
Name: MCKINSTER, KAREN
Address: 5831 WEST US 27
City-St-Zip: MAYO, FL 32066

Title: SEC () Delete
Name: DAVIS, ALLEN
Address: 402 SW EDISON ROAD
City-St-Zip: MAYO, FL 32066

Title: SEC () Delete
Name: OTTS, VALERIE
Address: 1076 SW ARLINGTON RD
City-St-Zip: MAYO, FL 32066

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:

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: KAREN MCKINSTER

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05/01/2008

Electronic Signature of Signing Officer or Director

Date