2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004976

FILED Apr 28, 2007 Secretary of State

Entity Name: DALMATIAN RESCUE OF THE NATURE COAST INC **Current Principal Place of Business: New Principal Place of Business:** 8144 W GROVER CLEVELAND BLVD HOMOSASSA, FL 34446 **Current Mailing Address: New Mailing Address:** 8144 W GROVER CLEVELAND BLVD HOMOSASSA, FL 34446 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SEARS, LEE 8144 W GROVER CLEVELAND BLVD HOMOSASSA, FL 34446 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SEARS, LEE Name: Name: Address: 8144 W GROVER CLEVELAND BLVD Address: City-St-Zip: HOMOSASSA, FL 34446 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PULLIAS, KEITH Name: Address: 5216 MEADOW DR Address: City-St-Zip: HOMOSASSA, FL 34446 City-St-Zip: Title: () Delete Title: () Change () Addition WATSON, DEANNA Name: Name: 5101 W WINTERSUN DR Address: Address: City-St-Zip: HOMOSASSA, FL 34446 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: LEE SEARS PRES 04/28/2007