## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000008542

Entity Name: CITIZENS FOR PETS IN CONDOS, INC.

FILED Feb 02, 2007 Secretary of State

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

4950 E. SABAL PALM BLVD., #109 4950 E. SABAL PALM BLVD. TAMARAC, FL 333192600

109

TAMARAC, FL 33319

**Current Mailing Address: New Mailing Address:** 

4950 E. SABAL PALM BLVD., #109 4950 E. SABAL PALM BLVD., #109

TAMARAC, FL 333192600

TAMARAC, FL 33319 26

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:

GREER, MAIDA W GENSER, MAIDA W 4950 E. SABAL PALM BLVD., #109 4950 E. SABAL PALM BLVD

TAMARAC, FL 333192600 ÚS 109 TAMARAC, FL 333192600 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: MAIDA W. GENSER 02/02/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD (X) Change ( ) Addition () Delete

GENSER, MAIDA W GENSER, MAIDA W Name: Name:

4950 E. SABAL PALM BLVD., #109 Address: 4950 E. SABAL PALM BLVD., #109 Address: City-St-Zip: TAMARAC, FL 333192600 City-St-Zip: TAMARAC, FL 333192600

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

Name: SHAPIRO, DAVID Name: SHAPIRO, DAVID

Address: 3520 S. OCEAN BLVD. ALEGRE 502 Address: 3520 S. OCEAN BLVD. ALEGRE 502 City-St-Zip:

PALM BCH, FL 334805788 City-St-Zip: PALM BCH, FL 334805788

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

FANCHER, KANDY Name: FANCHER, KANDY Name: 2204 NE 36TH ST., UNIT 25 2204 NE 36TH ST., UNIT 25 Address: Address: City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: MAIDA W. GENSER P/T 02/02/2007