

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010742

FILED
Feb 20, 2009
Secretary of State

Entity Name: SAVE A LIFE PET RESCUE, INC.

Current Principal Place of Business:

29711 WELLS RD
WESLEY CHAPEL, FL 33544

New Principal Place of Business:

Current Mailing Address:

PO BOX 623341
OVIEDO, FL 32762

New Mailing Address:

FEI Number: 61-1511434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PENBERTHY, COLETTE
29711 WELLS RD
WESLEY CHAPEL, FL 33544 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: VC () Delete
Name: YOST, ANNA
Address: 21708 HOBBY HORSE IN
City-St-Zip: CHRISTMAS, FL 32709

Title: T () Delete
Name: LARSON, JOHN
Address: 3302 ARDEN VILLAS BLVD APT 11
City-St-Zip: ORLANDO, FL 32817

Title: S () Delete
Name: PENBROKE, BRITTANY
Address: 213 KOHLER ST
City-St-Zip: TONAWANDA, NY 14150

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:

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: COLETTE PENBERTHY

PRES

02/20/2009

Electronic Signature of Signing Officer or Director

Date