## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000011593

Address:

City-St-Zip:

JOHNSTON CITY, IL

**FILED** Mar 26, 2008 Secretary of State

**Entity Name: PET FIX PROJECT INC. Current Principal Place of Business: New Principal Place of Business:** 14939 WARD RD ORLANDO, FL 32824 **Current Mailing Address: New Mailing Address:** 14939 WARD RD ORLANDO, FL 32824 FEI Number: 42-1715464 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, MARY E 14939 WARD RD ORLANDO, FL 32824 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 WILSON, MARY E Name: Name: Address: 14939 WARD RD Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PETREIKIS, JOHN Name: Address: 14937 WAARD RD Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: () Delete Title: () Change () Addition PETREIKIS, GAIL Name: Name: 14889 JEFFREY MINE RD

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.

Address:

City-St-Zip:

SIGNATURE: MARY E WILSON **PRES** 03/26/2008