2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2007
Secretary of State

DOCUMENT# N06000012052

Entity Name: PUFFY PAWS KITTY HAVEN INC.

Current Principal Place of Business:

270 LAKEVIEW LANE
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

270 LAKEVIEW LANE
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 20-5930672 **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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

KINGSTON, CHRIS
270 LAKEVIEW LANE
ENGLEWOOD, FL 34223 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: CHRIS KINGSTON 09/04/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: KINGSTON, CHRIS
Address: 270 LAKEVIEW LANE
City-St-Zip: ENGLEWOOD, FL 34223

Title: VP ( ) Delete
Name: KINGSTON, LINDA
Address: 270 LAKEVIEW LANE
City-St-Zip: ENGLEWOOD, FL 34223

Title: S ( ) Delete
Name: SIMIC, DARLENE
Address: 270 LAKEVIEW LANE
City-St-Zip: ENGLEWOOD, FL 34223

Title: DT ( ) Delete
Name: KINGSTON, RICK
Address: 270 LAKEVIEW LANE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D ( ) Delete
Name: DUKE, LINDA
Address: 270 LAKEVIEW LANE
City-St-Zip: ENGLEWOOD, FL 34223

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:

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: CHRIS KINGSTON DP 09/04/2007
Electronic Signature of Signing Officer or Director Date