


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90244 013 ****61.25

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DOCUMENT # N06445					
1. Entity Name HUMANE SOCIETY OF VERO BEACH AND INDIAN RIVER COUNTY, INC.					
Principal Place of Business 6230 77TH STREET VERO BEACH, FL 32967 US		Mailing Address PO BOX 644 VERO BEACH, FL 32961			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01082008 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-0863199	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CARLSON, JOAN 6230 77TH STREET VERO BEACH, FL 32960				Name <u>GORDON WILLARD</u> Street Address (P.O. Box Number is Not Acceptable) <u>6230 77th St.</u> City <u>Vero Beach</u> FL Zip Code <u>32967</u>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>[Signature]</u>				DATE <u>4-28-08</u>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRITT, J.C. MR		NAME	NANCY HENDRICKS	
STREET ADDRESS	6230 77TH ST.		STREET ADDRESS	6230 77th St	
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP	Vero Beach, Fl 32967	
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STARCK, DONNA		NAME		
STREET ADDRESS	6230 77TH STREET		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCDEVITT, THOMAS		NAME		
STREET ADDRESS	6230 77TH ST.		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORSE, CHALMERS		NAME		
STREET ADDRESS	6230 77TH ST.		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OBERTKOTTER, HAROLD		NAME		
STREET ADDRESS	6230 77TH ST.		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARSHALL, SHEILA		NAME	Deborah Vickers	
STREET ADDRESS	6230 77TH ST.		STREET ADDRESS	6230 77th St.	
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP	Vero Beach, Fl 32967	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u>			E. Dr.		DATE: <u>4-28-08</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		DAYTIME PHONE #: <u>772-388-3331</u>