

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003328

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: BIG HEARTS RESCUE AND REHABILITATION, INC.

## Current Principal Place of Business:

12304 LEANNE DRIVE  
DADE CITY, FL 33525

## New Principal Place of Business:

## Current Mailing Address:

12304 LEANNE DRIVE  
DADE CITY, FL 33525

## New Mailing Address:

PO BOX 20723  
TAMPA, FLORIDA, FL 33622 US

FEI Number: 20-8758579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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: DP ( ) Delete  
Name: MEDVECZKY, MISSY H  
Address: 12304 LEANNE DRIVE  
City-St-Zip: DADE CITY, FL 33525

Title: DS ( ) Delete  
Name: HICKS, HAROLD K  
Address: 15916 BRIDGEWATER LANE  
City-St-Zip: TAMPA, FL 33624

Title: DT ( ) Delete  
Name: MEDVECZKY, ARON P  
Address: 12304 LEANNE DRIVE  
City-St-Zip: DADE CITY, FL 33525

Title: D ( ) Delete  
Name: HICKS, RAQUEL  
Address: 15916 BRIDGEWATER LANE  
City-St-Zip: TAMPA, FL 33624

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: D (X) Change ( ) Addition  
Name: VELOCCI, NICOLE L  
Address: 30304 INGALLS COURT  
City-St-Zip: TAMPA, FL 33543

Title: D ( ) Change (X) Addition  
Name: MAZURKIEWICZ, DEANA L  
Address: 37015 WATERSIDE DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D ( ) Change (X) Addition  
Name: BELL, JIMI D  
Address: 6223 FROST DRIVE  
City-St-Zip: TAMPA, FL 33625

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: MISSY H MEDVECZKY

DP

01/16/2008

Electronic Signature of Signing Officer or Director

Date