

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008354

FILED
Mar 01, 2009
Secretary of State

Entity Name: RESCUED HEARTS ANIMAL SHELTER, INC.

Current Principal Place of Business:

123 CHEROKEE ROAD
ORMOND BEACH, FL 32174

New Principal Place of Business:

123 CHEROKEE ROAD
ORMOND BEACH, FL 32174 US

Current Mailing Address:

123 CHEROKEE ROAD
ORMOND BEACH, FL 32174

New Mailing Address:

P.O. BOX 731522
ORMOND BEACH, FL 32173 US

FEI Number: 51-0645719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WADE-CAROTENUTO, AMY
123 CHEROKEE ROAD
ORMOND BEACH, FL 32174 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: PT () Delete
Name: THULIN, ELIZABETH
Address: 36 CREEK BLUFF ROAD
City-St-Zip: FLAGLER BEACH, FL 32136

Title: V () Delete
Name: MYERS, LYNN H A
Address: 1338 HOLLY AVE.
City-St-Zip: HOLLY HILL, FL 32117

Title: S () Delete
Name: LECRONE, DIANE
Address: 224 RIVERBEND RD
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: GILBERT, ALLEN DR.
Address: 8 PANORAMA DR.
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: DUVAL, M. MARIA
Address: 226 RIVER BEACH DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: D () Delete
Name: HARDISON, INNA
Address: 285 WESTHAMPTON DR.
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MYERS, LYNN
Address: 1338 HOLLY AVE.
City-St-Zip: HOLLY HILL, FL 32117

Title: V (X) Change () Addition
Name: DUVAL, MARIA M
Address: 226 RIVER BEACH DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SCHAGEN, SUZANN
Address: 3 RYLEY LANE
City-St-Zip: PALM COAST, FL 32164

Title: D (X) Change () Addition
Name: LEVINE, ARNOLD
Address: 14 CLEMENTON LN.
City-St-Zip: PALM COAST, FL 32137

Title: D (X) Change () Addition
Name: GILBERT, ALLEN DR.
Address: 8 PANORAMA DR.
City-St-Zip: PALM COAST, FL 32164

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: DIANE W. LECRONE

SEC

03/01/2009

Electronic Signature of Signing Officer or Director

Date