

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008915

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: ZAHRA AFRICAN SHELTERS, INC.

**Current Principal Place of Business:**

680 LALIQUE CIRCLE  
1208  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

680 LALIQUE CIRCLE  
1208  
NAPLES, FL 34119

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZAHRA, BARBARA L  
680 LALIQUE CIRCLE  
1208  
NAPLES, FL 34119 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: P ( ) Delete  
Name: ZAHRA, BARBARA L  
Address: 680 LALIQUE CIRCLE #1208  
City-St-Zip: NAPLES, FL 34119

Title: VP ( ) Delete  
Name: MAZEAU, SUZANNE  
Address: 770 SHADOW BAY WAY  
City-St-Zip: OSPREY, FL 34229

Title: VP ( ) Delete  
Name: TOLEDO, MARTA  
Address: 4610 CHANTELE DRIVE #203  
City-St-Zip: NAPLES, FL 34112

**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:

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: BARBARA ZAHRA

P

03/22/2009

Electronic Signature of Signing Officer or Director

Date