

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010663

FILED
Mar 04, 2008
Secretary of State

Entity Name: LITTLE MIRACLES RABBIT RESCUE, INC.

Current Principal Place of Business:

4073 FEATHER TERRACE
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

4073 FEATHER TERRACE
NORTH PORT, FL 34286

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORSON, CHRISTINE L
4073 FEATHER TERRACE
NORTH PORT, FL 34286 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: CORSON, CHRISTINE
Address: 4073 FEATHER TERRACE
City-St-Zip: NORTH PORT, FL 34286

Title: VP () Delete
Name: EVANS, JUSTIN
Address: 19 EDGEHILL ROAD
City-St-Zip: GIBBSBORO, NJ 08026

Title: S () Delete
Name: MCCORMICK, MICHAEL
Address: 60 OAK RIDGE DR
City-St-Zip: VOORHEES, NJ 08043

Title: T () Delete
Name: CORSON, JUDITH
Address: 1103 HUDSON AVE
City-St-Zip: VOORHEES, NJ 08043

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:

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: JUSTIN M EVANS

VP

03/04/2008

Electronic Signature of Signing Officer or Director

Date