2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jan 16, 2011
Secretary of State

DOCUMENT# N08000000393

Entity Name: LOXAHATCHEE GROVES ANIMAL RESCUE, INC.

Current Principal Place of Business:

14404 NORTH ROAD
LOXAHATCHEE GROVES, FL 33470

New Principal Place of Business:

Current Mailing Address:

14404 NORTH ROAD
LOXAHATCHEE GROVES, FL 33470

New Mailing Address:

14404 NORTH ROAD
LOXAHATCHEE GROVES, FL 33470 US

FEI Number: 26-1783174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REILLY, WILLIAM J
5447 NW 42ND AVE
BOCA RATON, FL 33496 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: WILLIAM J REILLY
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: ED
Name: REILLY, SHANNON P
Address: 14404 NORTH ROAD
City-St-Zip: LOXAHATCHEE GROVES, FL 33470

Title: S
Name: REILLY, WILLIAM J
Address: 14404 NORTH ROAD
City-St-Zip: LOXAHATCHEE GROVES, FL 33470

Title: T
Name: SENISE, BONNIE
Address: 14404 NORTH ROAD
City-St-Zip: LOXAHATCHEE GROVES, FL 33470

Title: D
Name: GERAGHTY, ARLEEN H
Address: 23154 SW 54TH AVENUE
City-St-Zip: BOCA RATON, FL 33433 US

I hereby 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 all other like empowered.

SIGNATURE: ARLEEN H GERAGHTY D 01/16/2011
Electronic Signature of Signing Officer or Director Date