

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002447

FILED
Jan 24, 2009
Secretary of State

Entity Name: ANIMAL PROTECTIVE SERVICES, INC.

Current Principal Place of Business:

4529 CARTHAGE CIRCLE NORTH
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

4529 CARTHAGE CIRCLE NORTH
LAKE WORTH, FL 33463 US

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:

JOHNSTON, JUDI M
4529 CARTHAGE CIRCLE NORTH
LAKE WORTH, FL 33463 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: JOHNSTON, JUDI M
Address: 4529 CARTHAGE CIRCLE NORTH
City-St-Zip: LAKE WORTH, FL 33463 US

Title: VP () Delete
Name: JONES-FRIEDRICH, MELANIE
Address: 4529 CARTHAGE CIRCLE NORTH
City-St-Zip: LAKE WORTH, FL 33463 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JUDI M. JOHNSTON

PRES

01/24/2009

Electronic Signature of Signing Officer or Director

Date