

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2009  
Secretary of State**

DOCUMENT# N08000008083

**Entity Name:** BAILEY'S FOUNDATION FOR LESS FORTUNATE ANIMALS, INC.

**Current Principal Place of Business:**

7446 MELDIN COURT  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1264  
DESTIN, FL 32540 US

**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:**

LEININGER LAW FIRM, P.A.  
114 PALMETTO STREET  
SUITE 8  
DESTIN, FL 32541 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:                      CROCKETT, KELLI M  
Address:                      P.O. BOX 1264  
City-St-Zip:                      DESTIN, FL 32540 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: KELLI CROCKETT

P

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date