

**2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Sep 27, 2011  
Secretary of State**

DOCUMENT# N09000000981

Entity Name: PAWS, LEE COUNTY, INC.

**Current Principal Place of Business:**

13410 N CLEVELAND AVE.  
N FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

13410 N CLEVELAND AVE.  
N FORT MYERS, FL 33903

**New Mailing Address:**

FEI Number: 94-3467822

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DESILETS-INK, THERESA  
7129 S BRENTWOOD RD  
FT MYERS, FL 33919 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: THERESA DESILETS-INK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DESILETS-INK, THERESA  
Address: 7129 S BRENTWOOD RD  
City-St-Zip: FT MYERS, FL 33919

Title: STD  
Name: GOSNELL, GAYLE  
Address: 12140F METRO PKWY  
City-St-Zip: FT MYERS, FL 33966

Title: VPD  
Name: GISSENDANNER, ELTON DR DVM  
Address: 3029 PLACID VIEW DR  
City-St-Zip: LAKE PLACID, FL 33852

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: THERESA DESILETS-INK

PD

09/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date