

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000981

FILED
Apr 14, 2012
Secretary of State

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: _____

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

Title: DIR
Name: GALLOWAY, JENNIFER
Address: 13100 SHIRE LANE
City-St-Zip: FT MYERS, FL 33912

Title: DIR
Name: DORAN, MADELEINE DR
Address: 1521 BARCELONA AVE
City-St-Zip: FT MYERS, FL 33901

Title: DIR
Name: FELDMAN, KAREN
Address: 953 IRIS DR
City-St-Zip: N FT MYERS, FL 33903

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

PRES

04/14/2012

Electronic Signature of Signing Officer or Director

Date