

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004838

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** PUPPY PLEASERS RESCUE, INC.

**Current Principal Place of Business:**

6149 METROWEST BLVD  
ORLANDO, FL 32835

**New Principal Place of Business:**

6567 PICCADILLY LANE  
ORLANDO, FL 32835

**Current Mailing Address:**

PO BOX 618441  
ORLANDO, FL 32861

**New Mailing Address:**

**FEI Number:** 27-0267394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEASLEY, CHAVANDA R  
6149 METROWEST BLVD  
ORLANDO, FL 32835 US

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

BEASLEY, CHAVANDA R  
6567 PICCADILLY LANE  
ORLANDO, FL 32835 US

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: CHAVANDA BEASLEY

01/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DUBOULAY, MARILYN  
Address: 1301 FERENDINA DRIVE  
City-St-Zip: DELTONA, FL 32725

Title: D  
Name: HAYES, NORA  
Address: 640 SPICE TRADER WAY  
City-St-Zip: ORLANDO, FL 32818

Title: D  
Name: LESTER, ANGIE  
Address: 5102 LOG WAGON ROAD  
City-St-Zip: OCOEE, FL 34761

Title: D  
Name: BEASLEY, CHAVANDA R  
Address: 6567 PICCADILLY LANE  
City-St-Zip: ORLANDO, FL 32835

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: CHAVANDA BEASLEY

D

01/06/2010

Electronic Signature of Signing Officer or Director

Date