

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 08, 2011
Secretary of State

DOCUMENT# N09000006439

Entity Name: VETERANS VILLAGE & K-9 COMPANIONS CENTERS, INC.**Current Principal Place of Business:**500 BUSINESS CENTER DRIVE
SUITE 400
FORT WASHINGTON, PA 19034**New Principal Place of Business:**1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323**Current Mailing Address:**1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323**New Mailing Address:****FEI Number:** 80-0444182 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOPEZ, JULIE
7237 SW 23 STREET
MIAMI, FL 33513 US**Name and Address of New Registered Agent:**THOMAS, DENNIS
1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323 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: DENNIS THOMAS

08/08/2011

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** D
Name: LOPEZ, JOE
Address: 7237 SW 23 ST
City-St-Zip: MIAMI, FL 33055**Title:** D-CE
Name: THOMAS, DENNIS
Address: 1560 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323**Title:** P
Name: GIRON, BERTHA
Address: 1560 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33076**Title:** VP
Name: SOUTAR-FREEMAN, BETTY M PHD
Address: 5010 SW 170TH AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33331**Title:** D S
Name: LOPEZ, JULIE
Address: 1560 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323**Title:** T
Name: OLIVA, ROBERT
Address: 1560 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

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: BERTHA GIRON

P

08/08/2011

Electronic Signature of Signing Officer or Director_____
Date