

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 08, 2012
Secretary of State

DOCUMENT# N11000006163

Entity Name: ANIMAL CROSSINGS OF FLORIDA, INC.**Current Principal Place of Business:**4392 S.W. 52ND TERRACE
BUSHNELL, FL 33513**New Principal Place of Business:****Current Mailing Address:**4392 S.W. 52ND TERRACE
BUSHNELL, FL 33513**New Mailing Address:****FEI Number:** 80-0810484**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HARBSMEIER, CURT L
5116 SOUTH LAKELAND DRIVE
LAKELAND, FL 33813 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: BM
Name: KESZEY, ROBBIE
Address: 4392 S.W. 52ND TERRACE
City-St-Zip: BUSHNELL, FL 33513

Title: BM
Name: KESZEY, STEPHEN
Address: 4392 S.W. 52ND TERRACE
City-St-Zip: BUSHNELL, FL 33513

Title: BM
Name: RIPPS, JON
Address: 222 ROUTE 59, SUITE 111
City-St-Zip: SUFFERN, NY 10901

Title: BM
Name: MACINNES, ROBROY
Address: 4258 S.W. 52ND TERRACE
City-St-Zip: BUSHNELL, FL 33513

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: ROBBIE KESZEY

BM

05/08/2012

Electronic Signature of Signing Officer or Director

Date