

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 16, 2012
Secretary of State

DOCUMENT# N11000008738

Entity Name: CINAGRO FARM RESCUE SERVICES INC.**Current Principal Place of Business:**33526 TARLTON DRIVE
LEESBURG, FL 34788**New Principal Place of Business:**33526 TARLTON DRIVE
LEESBURG, FL 34788 UN**Current Mailing Address:**P.O. BOX 895661
LEESBURG, FL 34789**New Mailing Address:****FEI Number:** 45-3185222**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BORRELLI, CAROL
33526 TARLTON DRIVE
LEESBURG, FL 34788 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: O
Name: BORRELLI, CAROL
Address: 33526 TARLTON DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: D
Name: BORRELLI, SAMUEL
Address: 33526 TARLTON DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: D
Name: BORRELLI, ALEXANDER
Address: 33526 TARLTON DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: D
Name: TOY, SHERRY
Address: 6157 SE 143RD LANE
City-St-Zip: SUMMERFIELD, FL 34491

Title: D
Name: BROENNLE, ERIC
Address: 12399 SHAFTON RD
City-St-Zip: SPRING HILL, FL 34608

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: CAROL BORRELLI

O

01/16/2012

Electronic Signature of Signing Officer or Director

Date