2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Mar 03, 2005 DOCUMENT# N14745 Secretary of State

Entity Name: NASSAU HUMANE SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

671 AIRPORT RD

FERNANDINA BEACH, FL 32034 US

Current Mailing Address: New Mailing Address:

671 AIRPORT RD

US FERNANDINA BEACH, FL 32034

FEI Number: 59-2667141 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

POOLE, WESLEY R 303 CENTRE STREET SUITE 200, ALLAN BLDG FERNANDÍNA BEACH, FL 32034 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

BARCHARD, CURT DR Name: Name: 1868 SOUTH 14TH ST. Address: Address:

City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MADDOX, TRENT Name: MADDOX, TRENT Name:

Address: 1601 GERBING ROAD #250 Address: 1601 GERBING ROAD #250 City-St-Zip: FERNANDIAN BEACH, FL 32034 City-St-Zip: FERNANDIA BEACH, FL 32034

Title: () Delete Title: () Change () Addition

CROSS, GEOFFREY Name: Name: 4712 YACHTSMANS DRIVE Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

Name: GOODWIN, RHONDA Name: Address: 24 MARSH BAY COURT Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip:

Title: () Delete Title: () Change () Addition

DEAVER, HOUSTON Name: Name: 15 SOUTH FLETCHER AVENUE Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip:

Title: () Delete Title: () Change (X) Addition

WOOD, LARRY Name: Name: Address: Address: THE RESIDENCE #108

8144 FIRST COAST HWY, FL 32034 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEOFFREY CROSS TD 03/03/2005