2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 10, 2010
Secretary of State

DOCUMENT# N26085

Entity Name: FLORIDA AID TO ANIMALS SPAY/NEUTER MEDICAL FACILITY INC.

Current Principal Place of Business:

741 CREEL ST
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

741 CREEL ST
MELBOURNE, FL 32935 US

New Mailing Address:

FEI Number: 59-2880920 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LISA ALFORD
146 PALM TREE COURT
PALM SHORES, FL 32940 US

Name and Address of New Registered Agent:

LISA ALFORD
751 DINNER ST. NE
PALM BAY, FL 32907 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: LISA ALFORD 09/10/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: DORSEY, ISABELLE
Address: 146 PALM TREE CT
City-St-Zip: MELBOURNE, FL 32940

Title: VP
Name: ANNA JAYNE
Address: 260 PARK AVE.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S/T
Name: LISA ALFORD
Address: 751 DINNER ST. NE
City-St-Zip: PALM BAY, FL 32907

Title: D
Name: CAROL MCCORMACK
Address: 165 PALM CIRCLE
City-St-Zip: PALM SHORES, FL 32940

Title: D
Name: DR. EDWIN CHAN
Address: 6451 BORASCO #3607
City-St-Zip: MELBOURNE, FL 32940

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: LISA A. ALFORD S/T 09/10/2010
Electronic Signature of Signing Officer or Director Date