2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# N44953

Entity Name: ANIMAL AID FOUNDATION, INC.

Current Principal Place of Business:

1410 WEKEWA NENE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1410 WEKEWA NENE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3085613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AUGUSTINE, STEVE
1410 WEKEWA NENE
TALLAHASSEE, FL 32301 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: D ( ) Delete
Name: MORGAN, KATE C.,
Address: 1410 WEKEWA NENE
City-St-Zip: TALLAHASSEE, FL

Title: D ( ) Delete
Name: GARCIA, MARGO,
Address: 6735 CHEVY WAY
City-St-Zip: TALLAHASSEE, FL

Title: D ( ) Delete
Name: AUGUSTINE, STEVE,
Address: 1410 WEKEWA NENE
City-St-Zip: TALLAHASSEE, FL

Title: D ( ) Delete
Name: KEMP, ANN,
Address: 2029 WAHALA NENE
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: REYNOLDS, MEGAN,
Address: 1907 NANTICOKE CIR
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change ( ) Addition
Name: GARCIA, MARGO,
Address: 6735 CHEVY WAY
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change ( ) Addition
Name: AUGUSTINE, STEVE,
Address: 1410 WEKEWA NENE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change ( ) Addition
Name: KEMP, ANN,
Address: 2029 WAHALA NENE
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN G. AUGUSTINE D 03/29/2009
Electronic Signature of Signing Officer or Director — Date