

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51048

FILED
Feb 11, 2012
Secretary of State

Entity Name: ANIMAL RESCUE OF LABELLE, INC.

Current Principal Place of Business:

721 N.BRIDGE STREET
LABELLE, FL 33935

New Principal Place of Business:

463 EAST LINCOLN AVENUE
LABELLE, FL 33935

Current Mailing Address:

POST OFFICE BOX 2441
LABELLE, FL 33935

New Mailing Address:

FEI Number: 65-0404638 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHEPPARD, DIANE G
1451 NOBLES AVENUE
LABELLE, FL 33935 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: PD
Name: SHEPPARD, DIANE G
Address: 1451 NOBLES AVENUE
City-St-Zip: LABELLE, FL 33935

Title: TD
Name: SHEPPARD, PETER C
Address: 1451 NOBLES AVENUE
City-St-Zip: LABELLE, FL 33935

Title: VP
Name: STOCKWELL, EARL P
Address: 1459 NOBLES AVENUE
City-St-Zip: LABELLE, FL 33935

Title: D
Name: ADDISON, AUSTIN
Address: 939 W CR 78
City-St-Zip: LABELLE, FL

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: PETER C SHEPPARD

TR

02/11/2012

Electronic Signature of Signing Officer or Director

Date