

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51448

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** HUMANE SOCIETY OF GILCHRIST COUNTY, INC.

**Current Principal Place of Business:**

6739 NW 7TH PL  
BELL, FL 32619 US

**New Principal Place of Business:**

**Current Mailing Address:**

6739 N.W. 7TH PL  
BELL, FL 32619 US

**New Mailing Address:**

**FEI Number:** 59-3058427

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SELLERS-BAYER, CINDY  
6739 NW 7TH PL  
BELL, FL 32619 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: P  
Name: BAYER-SELLERS, CINDY  
Address: 6739 NW 7TH PL  
City-St-Zip: BELL, FL 32619

Title: VP  
Name: BAYER, EDWARD  
Address: 6739 NW 7TH PL  
City-St-Zip: BELL, FL 32619

Title: T  
Name: KINNEY, TIMOTHY  
Address: 6730 NW 7TH PL.  
City-St-Zip: BELL, FL 32619

Title: D  
Name: DACOSTA, JEAN  
Address: 8441 NW 115TH ST  
City-St-Zip: CHIEFLAND, FL 32626

Title: D  
Name: FRASSRAND, LOUISE  
Address: PO BOX 425  
City-St-Zip: BELL, FL 32619

Title: S  
Name: RENNER, KIMBERLY  
Address: 21 NE 580THST  
City-St-Zip: OLD TOWN, FL 32680

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: CINDY SELLERS-BAYER

P

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date