

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 11:14

DOCUMENT # **N93000001445 (6)**

1. Corporation Name

PET ACTION LEAGUE (P.A.L.), INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**193 SYCAMORE DRIVE
DEBARY FL 32713**

Mailing Address
**193 SYCAMORE DRIVE
DEBARY FL 32713**

3. Date Incorporated or Qualified
03/31/1993

3a. Date of Last Report
04/07/1994

4. FEI Number
59-3182542

Applied For
 Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**DAILEY, JEAN M
193 SYCAMORE DRIVE
DEBARY FL 32713**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent Signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **DAILEY, JEAN M**
STREET ADDRESS **193 SYCAMORE DRIVE**
CITY - ST - ZIP **DEBARY FL 32713**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **VD**
NAME **SOROKWRS, DERAY D**
STREET ADDRESS **2901 BRIDGEHAMPTON DR.**
CITY - ST - ZIP **ORLANDO FL 32812**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **TD**
NAME **SHOEMAKER, RICHARD L**
STREET ADDRESS **6601 N.W. 14TH ST. #1**
CITY - ST - ZIP **PLANTATION FL 33313**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **DS**
NAME **HARRING, KARL N**
STREET ADDRESS **407 N.W. 47TH ST.**
CITY - ST - ZIP **FT. LAUDERDALE FL 33309**

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jean M. Dailey JEAN M. DAILEY 3/19/95 (407)668-6103
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Type in Florida #)