

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002087

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** ST. FRANCIS ANIMAL RESCUE OF VENICE, INC.

**Current Principal Place of Business:**

1925 SOUTH TAMIAMI TRAIL  
VENICE, FL 34293 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 563  
NOKOMIS, FL 34274 US

**New Mailing Address:**

**FEI Number:** 65-0409317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRUBER, LIN  
1925 SOUTH TAMIAMI TRAIL  
VENICE, FL 34293 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  
**Name:** GRUBER, LIN M TREAS.  
**Address:** 8050 MANASOTA KEY RD.  
**City-St-Zip:** ENGLEWOOD, FL 34223 US

**Title:** D  
**Name:** CLARK, JILL PRES.  
**Address:** 1478 VERMEER DR.  
**City-St-Zip:** NOKOMIS, FL 34275 US

**Title:** D  
**Name:** SHARON, HAMANT  
**Address:** 575 BELLAIRE DR.  
**City-St-Zip:** VENICE, FL 34283 US

**Title:** D  
**Name:** CARSON, GAIL SECTY.  
**Address:** 221 ALSACE AVE.  
**City-St-Zip:** VENICE, FL 34293 US

**Title:** D  
**Name:** ERICKSON, ALBERTA  
**Address:** 6737 BUCKBOARD ST.  
**City-St-Zip:** NORTH PORT, FL 34286 US

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:** LIN GRUBER

D

01/13/2010

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

\_\_\_\_\_  
Date