

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003058

FILED
Feb 24, 2007
Secretary of State

Entity Name: NORTH AMERICAN PET OWNERS ALLIANCE, INC.

Current Principal Place of Business:

3395 NW 37TH AVE
LAUDERDALE LAKES, FL 33309

New Principal Place of Business:

Current Mailing Address:

3395 NW 37TH AVE
LAUDERDALE LAKES, FL 33309

New Mailing Address:

FEI Number: 65-0423352

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FACH, RON F CAPT.
3395 NW 37 AVE.
LAUDERDALE LAKES, FL 33309 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: PTD () Delete
Name: FACH, RON CAPT
Address: 3395 NW 37TH AVE
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: VD () Delete
Name: LEONARD, WILLIAM R
Address: 633 S ANDREWS AVE #402
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D () Delete
Name: BROWNE, MAXINE
Address: 12730 COTTAGE AVE
City-St-Zip: CHARLEVOIX, MI 48720

Title: D () Delete
Name: BOUVIER, JOHN A III
Address: 3460 JOE ASHTON RD.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D () Delete
Name: VAN DEN BOSCH, DICK
Address: 17118 NW 138 AVE
City-St-Zip: ALACHUA, FL 32615

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: FACH, RON F CAPT
Address: 3395 NW 37TH AVE
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BRAUN, MICHAEL DR.
Address: 3395 NW 37 AVE.
City-St-Zip: LAUDERDALE LAKES, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the 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: RON F. FACH

PRES

02/24/2007

Electronic Signature of Signing Officer or Director

Date