## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9400000248

Entity Name: PUPPIES UNDER PROTECTION, INC.

FILED Feb 18, 2008 Secretary of State

Current Principal Place of Business:				New Princ	New Principal Place of Business:		
	AL PALM BEAC	H BLVD.					
#246 ROYAL PA	ALM BEACH, FL	. 33411	US				
Current Mailing Address:				New Maili	New Mailing Address:		
4930 129TH AVE NO ROYAL PALM BEACH, FL 33411 US			US				
FEI Number:	: 65-0477802	FEI Numb	per Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Re	gistered Agent:	Name and	Address of New Registered Agent:		
STRACK, 4930 129T ROYAL PA		. 33411	US				
	named entity s e of Florida.	ubmits thi	s statement for the p	urpose of changing i	ts registered office or registered agent, or both,		
SIGNATUR	RE:						
	Electroni	c Signatu	re of Registered Age	ent	Date		
OFFICER	S AND DIRECT	ORS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () STRACK, JEANN 4930 129TH AVE ROYAL PALM BO	NO	11 US	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () STRACK, KARL 4930 129TH AVE ROYAL PALM B	NORTH	33411 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	S () STRACK, JEANN 4930 129TH AVE ROYAL PALM B	NORLTH	33411 US	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () AUTREY, LAURA 13156 NORTH R LOXAHATCHEE,	OAD	us	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BOD () COSTAIN, JENN 15629 79TH COI LOXAHATCHEE,	JRT NO.	us	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	BOD () STRACK, STEPH 4123D PALM BA WEST PALM BE	AY CIRCLE	3406 US	Title: Name: Address: City-St-Zip:	BOD (X) Change ( ) Addition STRACK, STEPHANIE 4930 129TH AVE. NO. ROYAL PALM BEACH, FL 33411 US		

I hereby certify that the information supplied with this filing does not qualify 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: JEANNE STRACK P 02/18/2008