FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9400001114

FLORIDA ANIMAL LEAGUE, INC.

FILED Feb 24, 1999 8:00 am § Secretary of State

02-24-1999 90075 040 ****61.25

}	,								
Principal Place 1950 44TH AVE VERO BEACH	ENUE	Mailing Address 1950 44TH AVENUE VERO BEACH FL 32966				-			
Principal Place of Business 2a. Mailing Address 2a.			illing Address				3. Date Incorporated or Qualifed 02/28/1994		
Suite, Apt.	#. etc.		Suite, Apt. #, etc.				4. FEI Number Applied For		
22	27						59-3225738 Not Applicable		
City & Stat	е	<u> </u>	City & State				5. Certificate of Status Desired		
Zip	Country Zip Co			Coun	try		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
24	9. Name and Address of Curre		d Agent	[30]			10. Name and Address of New Registered Agent		
0000		iit registore	u Agent	1	81	Name			
Bennett WHITEFT, SLOANE					B2	Street /	ddress (P.O. Box Number is Not Acceptable)		
1950 44Th									
VERO BEACH FL 32966					83				
				Į:	B4	City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature based or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
42	Signature, typed or printed name of registered agr OFFICERS A		· ···	13.	gent	signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	PD OFFICERS A	ND DIRECTO	DELETE	1,1 TITL	E		☐ Change ☐ Addition		
NAME	BURDEN, VICKIE		_	1.2 NAN	Œ		· ·		
STREET ADDRESS	11360 W. BROADSTREAM			1.3 STREE		ADDRESS	,		
CITY-ST-ZIP	ST. CLOUD FL 34773			1.4 CITY-9					
TITLE	SD		☐ DELETE	2.1 TITL	E		Sloane Bennett Dehange Addition		
NAME -	WINNETT, SLONE			2.2 NAME			35 Valencia Rd		
STREET ADDRESS	000-11. 2110/120-11					w. Melbourne, FL 32904			
CITY-ST-ZIP	01. 02000 12 01.70			2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition			
TITLE	DANDOLDH HEATHED		C) DELETE	3.2 NAME		1			
NAME STREET ADDRESS	RANDOLPH, HEATHER 516 E LINCOLN AVE			3.3 STREE		ADDRESS	,		
CITY-ST-ZIP	MELBOURNE FL 32901			3.4. CITY-			· _ ·		
TITLE	THE COUNTY OF THE PERSON OF TH		☐ DELETE	4.1 TITLE			Change Addition		
NAME				4.2 NAME					
STREET ADDRESS				4.3 STREE		ADDRESS	3		
CITY-ST-ZIP				4.4 CITY-S		r-zip			
TITLE			DELETE	5.1 TITLE			Change Addition		
NAME				5.2 NAME					
STREET ADDRESS						ADDRESS	5		
CITY+ST-ZIP				5.4 CIT		-ZIP	Change Addition		
TITLE			DELETE	6.1 TITE			L] Colarge L] Addition		
NAME				6.2 NAM		ADDDCCC			
STREET ADDRESS				6.3 STF	CE I	ADDRESS	,		

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

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