

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001399

FILED  
Aug 09, 2007  
Secretary of State

Entity Name: REFUGE PINELLAS, INC.

## Current Principal Place of Business:

33 4TH ST. NORTH, SUITE 203  
SAINT PETERSBURG, FL 33701 US

## New Principal Place of Business:

1818 29TH AVE, NORTH  
SAINT PETERSBURG, FL 33713 US

## Current Mailing Address:

3209 56TH WAY NORTH  
ST. PETE, FL 3371

## New Mailing Address:

3209 56TH WAY NORTH  
ST. PETE, FL 33710

FEI Number: 59-3374369 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

WILL, SCOTT  
515 RAFAEL BLVD. NE  
ST. PETERSBURG, FL 33704 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 ( ) Delete  
Name: WRIGHT, BRUCE  
Address: 4434 6TH AVE N  
City-St-Zip: ST PETERSBURG, FL 33713

Title: D ( ) Delete  
Name: MCCUTCHEN, JOE  
Address: 1543 HWY 138 S.E., SUITE 336  
City-St-Zip: CONYERS, GA 30013

Title: D ( ) Delete  
Name: SYKES, MANUEL  
Address: 2901 54 AVE. SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: THOMPSON, DON  
Address: 2215 SUNSET DRIVE  
City-St-Zip: BRADENTON, FL 34207

Title: D ( ) Delete  
Name: SEGALL, DENNIS  
Address: 4507 NORTH NEBRASKA AVE.  
City-St-Zip: TAMPA, FL 33603

Title: D ( ) Delete  
Name: ORTIZ, CHRIS  
Address: 2803 38TH AVE. NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33713

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WRIGHT, BRUCE  
Address: 3209 56TH WAY NORTH  
City-St-Zip: ST PETERSBURG, FL 33710

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

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

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

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

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

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: BRUCE WRIGHT

REV,

08/09/2007

Electronic Signature of Signing Officer or Director

Date