

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003955

FILED
Mar 10, 2009
Secretary of State

Entity Name: STRAY NO MORE, INC.

Current Principal Place of Business:

99 MEADOWS PARK LANE
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6106
LAKE WORTH, FL 334666106

New Mailing Address:

FEI Number: 65-0515998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHTOWER, SANDRA
99 MEADOWS PARK LANE
BOYNTON BEACH, FL 33436 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: WERLING, SUE
Address: 121 GRANADA CT
City-St-Zip: LAKE WORTH, FL 33461

Title: PT () Delete
Name: HIGHTOWER, SANDRA
Address: 99 MEADOWS PARK LANE
City-St-Zip: BOYNTON BEACH, FL

Title: S () Delete
Name: SHEARHOUSE, SUE
Address: 6640 EASTVIEW DR
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SANDRA HIGHTOWER

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date