

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000006297 (5)

1. Corporation Name

THE NATIONAL SAVE-A-PET FOUNDATION, INC.



Principal Place of Business

Mailing Address

224 DATURA RM 414
WEST PALM BEACH FL 33401-5632
US

224 DATURA ST RM 414
WEST PALM BEACH FL 33401-5632
US

3. Date Incorporated or Qualified
12/23/1994

3a. Date of Last Report
03/02/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number 65-0572604
APPLIED FOR

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23

28

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHAPERO, BERTRAM
224 DATURA STREET RM 414
WEST PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-statuting)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME MAXWELL, GERTRUDE G
STREET ADDRESS 1473 N OCEAN BLVD
CITY-ST-ZIP PALM BEACH FL 33480

11 TITLE P/T/O ☒ Change ☐ Addition
12 NAME MAXWELL, GERTRUDE G.
13 STREET ADDRESS 1473 N OCEAN BLVD
14 CITY-ST-ZIP PALM BEACH, FL 33480

TITLE D ☐ DELETE
NAME PRAT, GENE
STREET ADDRESS P.O. BOX 1 N/A
CITY-ST-ZIP KENTFIELD CA 94914

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME GUICHARD, ROBERT
STREET ADDRESS 1578 35TH AVE
CITY-ST-ZIP SAN FRANCISCO CA 94122

31 TITLE D ☒ Change ☐ Addition
32 NAME TIMOTHY K. MC ATEE
33 STREET ADDRESS 130 SANTA ANA AVE
34 CITY-ST-ZIP SAN FRANCISCO, CA 94127

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE S ☐ Change ☒ Addition
42 NAME INA SANDOVAL
43 STREET ADDRESS 1412 CREST DR
44 CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

GERTRUDE G. MAXWELL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gertrude G Maxwell
Date

407-8326660
Duplicate Filing #

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