

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001657

1. Entity Name

PET-PEOPLE EDUCATION COUNCIL, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90226 007 ****70.00

Principal Place of Business

Mailing Address

219 - 26TH AVE., S.W.
VERO BEACH FL 32962

219 - 26TH AVE., S.W.
VERO BEACH FL 32962-3302

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0584376

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELLIS, CONNIE C
219 - 26TH AVE., S.W.
VERO BEACH FL 32962

Name

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

City

FL

Zip Code

8. 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

CONNIE C. ELLIS

4-12-00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME

PSD
ELLIS, CONNIE C
219 - 26TH AVE., S.W.
VERO BEACH FL 32962

☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

D
WOODY, C. JOSEPH
219 - 26TH AVE., S.W.
VERO BEACH FL 32962

☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

D
NICHOLLS, JEAN
219 - 26TH AVE., S.W.
VERO BEACH FL 32962

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STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CONNIE C. ELLIS

4-12-00

561-561-4034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)