2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2009
Secretary of State

DOCUMENT# N95000001879

Entity Name: NEW HORIZONS SERVICE DOGS, INC.

Current Principal Place of Business:

1590 LAUREL PARK CT.
ORANGE CITY, FL 32763 US

New Principal Place of Business:

Current Mailing Address:

1590 LAUREL PARK CT.
ORANGE CITY, FL 32763 US

New Mailing Address:

FEI Number: 59-3334829 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEVERT, JANET
1590 LAUREL PARK CT.
ORANGE CITY, FL 32763 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:	MR.	( ) Delete
Name:	MICHAEL, RAY	
Address:	617 COPPER BEECH BLVD.	
City-St-Zip:	DELTONA, FL 32725 US	
Title:	MRS.	( ) Delete
Name:	BROBERG, BEVERLY	
Address:	220 MONTEREY RD	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	MS.	( ) Delete
Name:	WILSON, MARTY	
Address:	6065 LAKE CHARM CIR.	
City-St-Zip:	OVIEDO, FL 32765	
Title:	MR.	( ) Delete
Name:	CRAIG, MICHAEL	
Address:	1030 SHANGRI-LA LANE	
City-St-Zip:	OVIEDO, FL 32765	
Title:	MS.	( ) Delete
Name:	SALLY, CHESTER	
Address:	148 BLOOMFIELD AVE.	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	MR.	( ) Delete
Name:	SWINDLE, MICHAEL ESQ.	
Address:	174 W. COMSTOCK AVE., SUITE 101	
City-St-Zip:	WINTER PARK, FL 32789	

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:	
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: JANET SEVERT ED 01/31/2009

Electronic Signature of Signing Officer or Director — Date