2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2008
Secretary of State

DOCUMENT# N96000000598

Entity Name: CREATING ANIMAL RESPECT EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

4609 W. PONKAN RD.
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

4609 W. PONKAN RD.
APOPKA, FL 32712 US

New Mailing Address:

FEI Number: 59-3369425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

BURFORD, CHRISTINA
4604 W. PONKAN RD.
APOPKA, FL 32712 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: BURFORD, CHRISTINA A
Address: 4609 W. PONKAN RD.
City-St-Zip: APOPKA, FL 32712 US

Title: D ( ) Delete
Name: BOSSER, JOSEPH
Address: 14 N HILLSIDE AVE
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: DEVITA, TRAVIS
Address: 428 ROSELAWN DR
City-St-Zip: ORLANDO, FL 32839

Title: D ( ) Delete
Name: HERDT, CONNIE
Address: 14840 OLDHAM DRIVE
City-St-Zip: ORLANDO, FL 32826

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:

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: C. A. BURFORD PRES 07/21/2008

Electronic Signature of Signing Officer or Director — Date