

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N96000005218**

1. Entity Name

MARINE ANIMAL RESCUE SOCIETY, INC.**FILED**
May 07, 2001 8:00 am
Secretary of State

05-07-2001 90052 020 ****61.25

004300

Principal Place of Business

Mailing Address

FLORIDA INTERNATIONAL UNIVERSITY
3000 NE 145TH ST
NORTH MIAMI FL 33181-3600**FLORIDA INTERNATIONAL UNIVERSITY**
3000 NE 145TH ST
NORTH MIAMI FL 33181-3600

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0728506

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PELTON, CRAIG A
FLORIDA INTERNATIONAL UNIVERSITY
3000 NE 145TH ST
NORTH MIAMI FL 33181-3600

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. 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 STREET ADDRESS CITY-ST-ZIP | DP PELTON, CRAIG A 1039 NE 82ND TER MIAMI FL 33138 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV HADJEZ, CRIS 9591 FOUNTAINBLEAU BLVD. #506 MIAMI FL 33172 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT STINSON, PABLO 5940 SW 82ND ST S MIAMI FL 33143 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS THOMAS, GREG C 2707 ADAMS MILL RD NW 101 WASHINGTON DC 20009 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

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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: *Craig A Pelton* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01

Date

305) 919-5503

Daytime Phone #

CR2E037 (10/00)