

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000195

FILED  
May 09, 2008  
Secretary of State

**Entity Name:** RACING DOG RESCUE PROJECT, INC.

**Current Principal Place of Business:**

4056 SW LANGFORD STREET  
ARCADIA, FL 34266 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 18153  
SARASOTA, FL 34276 US

**New Mailing Address:**

**FEI Number:** 65-0748752 **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:**

**Name and Address of New Registered Agent:**

MURPHY, MARGARET  
4056 SW LANGFORD STREET  
ARCADIA, FL 34266 US

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: PETERSON, CAROLE  
Address: 630 OLD ENGLEWOOD RD  
City-St-Zip: ENGLEWOOD, FL 34223

Title: D ( ) Delete  
Name: DRAGRI, JOHANNA L  
Address: 2461 BRITANNIA RD  
City-St-Zip: SARASOTA, FL 34231

Title: TD ( ) Delete  
Name: MESSINA, INGRID B  
Address: 417 MELODY CIR  
City-St-Zip: SARASOTA, FL 34237

Title: PD ( ) Delete  
Name: MURPHY, MARGARET  
Address: 4056 SW LANGFORD ST  
City-St-Zip: ARCADIA, FL 34266

Title: DS ( ) Delete  
Name: PEARCE, JUDI  
Address: 4867 OAK POINTE WAY  
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete  
Name: SORG, NANCY  
Address: 6302 68 DRIVE E  
City-St-Zip: PALMETTO, FL 34221

**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: INGRID MESSINA

TD

05/09/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date