2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2010
Secretary of State

DOCUMENT# N97000000534

Entity Name: CENTRAL FLORIDA ANIMAL RESERVE, INC.

Current Principal Place of Business:

5420 DATE PALM STREET
COCOA, FL 32927

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 184
SHARPES, FL 32959

New Mailing Address:

FEI Number: 59-3418943 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

JULIA B. KUNIGAN
12970 LOWER RIVER BLVD
ORLANDO, FL 32828 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: DCTS
Name: KUNIGAN, JULIA
Address: 12970 LOWER RIVER BLVD
City-St-Zip: ORLANDO, FL 32828

Title: DP
Name: BLUE, THOMAS
Address: 308 LANSING ISLAND DR.
City-St-Zip: SATELLITE BCH, FL 32937

Title: DV
Name: FARRAR, SHARON
Address: 5420 DATE PALM STREET
City-St-Zip: COCOA, FL 32927

Title: D
Name: BLUE, EFFIE
Address: 308 LANSING ISLAND DR.
City-St-Zip: SATELLITE BCH, FL 32937

Title: DSRV
Name: WILTZ, KEVIN SIMBA
Address: 2632 ROBERT TRENT JONES DR #110
City-St-Zip: ORLANDO, FL 32835

I hereby 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 all other like empowered.

SIGNATURE: JULIA KUNIGAN DCTS 05/02/2010

Electronic Signature of Signing Officer or Director — Date