2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000545

FILED Jun 30, 2006 Secretary of State

Entity Name: BORDER COLLIE RESCUE, INC. Current Principal Place of Business: 886 STATE RD 26 MELROSE, FL 32666 US Current Mailing Address: New Mailing Address: SET Number: 65-0719339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.19332 Principal Place of Status Desired () In accordance with s. 607.19332 Principal Place of Status Desired () In accordance with s. 607.19332 Principal Place of Status Desired () In accordance with s. 607.19332 Principal Place of Status Desired () In accordance with s. 607.19332 Principal Place of Status Desired () In accordance with s. 607.1932(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of New Registered Agent: CARTER, NICHOLAS B 886 STATE RD 26 MELROSE, FL 32666 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 OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D () Delete Name: Address: Address: Address: Address: Address: Address: Address: Address: B86 STR D26 City-St-Zip: Title: Name: Address: Address: B86 STR D28 City-St-Zip: Title: Name: Address: B86 STR D28 City-St-Zip: Title: City-St-Zip: Title: City-St-Zip: Title: City-St-Zip: Title: City-St-Zip: Title: City-St-Zip: Title:					
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16051 E FM 1097 WILLIS, TX 77378 US FEI Number: 65-0719339 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: CARTER, NICHOLAS B 886 STATE RD 26 MELROSE, FL 32666 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D () Delete Title: () Change () Addition Name: CARTER, NICHOLAS B Address: () City-St-Zip: Title: D () Delete Title: () Change () Addition Name: FLANAGAN, ROBERT Name: Address: () City-St-Zip: Title: D () Delete Title: () Change () Addition Name: PLANAGAN, ROBERT Name: Address: () City-St-Zip: Title: D () Delete Title: () Change () Addition Name: CARTER, NICHOLAS B Address: () City-St-Zip: Title: D () Delete Title: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: CARTER, KELLY Name: () Change () Addition Name: () Change ()					
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886 STATE RD 26 MELROSE, FL 32666 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	Name and	a Address of Current Registered Agent:	Name and Addre	ss of New Registered Agent:	
in the State of Florida. SIGNATURE:	886 STAT	E RD 26			
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D () Delete Title: () Change () Addition Name: CARTER, NICHOLAS B Name: Address: Oity-St-Zip: MELROSE, FL 32666 Title: D () Delete Title: () Change () Addition Name: FLANAGAN, ROBERT Name: Address: Oity-St-Zip: MELROSE, FL 32666 Title: D () Delete Name: Address: Oity-St-Zip: MELROSE, FL 32666 Title: D () Delete Name: Address: Oity-St-Zip: MELROSE, FL 32666 Title: D () Delete Name: Address: () Change () Addition Name: CARTER, KELLY Name: Address: Ad			se of changing its regis	tered office or registered agent, or both,	
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Name: FLANAGAN, RÓBERT Name: Address: 886 ST RD 26 Address: City-St-Zip: MELROSE, FL 32666 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: CARTER, KELLY Name: Address: 886 ST RD 26 Address:	Name: Address:	CARTER, NICHOLAS B 886 ST RD 26	Name: Address:	() Change () Addition	
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I hereby certify that the information supplied with this filing does not qualify for the 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: NICHOLAS B. CARTER D 06/30/2006