

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001369

FILED  
Apr 16, 2006  
Secretary of State

Entity Name: SAVE OUR STRAYS RESCUE, INC.

## Current Principal Place of Business:

16081 WILTSHIRE DRIVE, EAST  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

16081 E WILTSHIRE DRIVE  
LOXAHATCHEE, FL 33470

## Current Mailing Address:

POST OFFICE BOX 1284  
LOXAHATCHEE, FL 33470

## New Mailing Address:

16081 E WILTSHIRE DRIVE  
LOXAHATCHEE, FL 33470

FEI Number: 65-0735607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

THOMAS, JOHN O  
16081 WILTSHIRE DR EAST  
LOXAHATCHEE, FL 33470 US

## Name and Address of New Registered Agent:

THOMAS, JOHN O  
16081 E WILTSHIRE DRIVE  
LOXAHATCHEE, FL 33470 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:

04/16/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: WAKERLEY, PETRA D  
Address: 16081 WILTSHIRE DR EAST  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: SD ( ) Delete  
Name: THOMAS, JOHN O  
Address: 16081 WILTSHIRE DRIVE, EAST  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VD (X) Delete  
Name: THOMAS, RENEE J  
Address: 16081 WILTSHIRE DRIVE, EAST  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: THOMAS, RENEE J  
Address: 16081 E WILTSHIRE DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: SD (X) Change ( ) Addition  
Name: THOMAS, JOHN O  
Address: 16081 E WILTSHIRE DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN O. THOMAS

SD

04/16/2006

Electronic Signature of Signing Officer or Director

Date