

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004680

Entity Name: RACCOON RESCUE, INC.

FILED  
Mar 28, 2004  
Secretary of State

**Current Principal Place of Business:**

8387 SCOTTISH COURT  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

8387 SCOTTISH COURT  
JACKSONVILLE, FL 32244

**New Mailing Address:**

FEI Number: 59-3463601

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GODWIN, KATHLEEN  
8387 SCOTTISH COURT  
JACKSONVILLE, FL 32244

**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: PD ( ) Delete  
Name: GODWIN, KATHLEEN  
Address: 8387 SCOTTISH CT.  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VPD ( ) Delete  
Name: PATRICK, SUSAN  
Address: 4557 DEER VALLEY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: STD ( ) Delete  
Name: HOFFMAN, MICHAEL J.  
Address: 1447 MURRAY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32205

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHLEEN GODWIN

PD

03/28/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date