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FILED  
May 08 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N97000006413 (5)

1. Corporation Name

SPAYD WITH HEART, INC.



Principal Place of Business

Mailing Address

1846 HOLLEY TIMBER ROAD  
COTTONDALE FL 32431

1846 HOLLEY TIMBER ROAD  
COTTONDALE FL 32431

3. Date Incorporated or Qualified

11/14/1997

4. FEI Number

59-3479351

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 1912 Holley Timber Rd  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29 32431

30 U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fee

7. Is this nonprofit corporation a homeowners association?

Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name

LORI ARMENTI

82 Street Address (P.O. Box Number is Not Acceptable)

83

1912 HOLLEY TIMBER Rd.

84 City

COTTONDALE

FL

85 Zip Code

32431

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Lori Armenti*

LORI ARMENTI

PRES.

DATE

1/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME ARMENTI, LORI  
STREET ADDRESS 1846 HOLLEY TIMBER ROAD  
CITY-ST-ZIP COTTONDALE FL 32431

TITLE VD  
NAME VAN NEVEL, GEORGE  
STREET ADDRESS 1846 HOLLEY TIMBER ROAD  
CITY-ST-ZIP COTTONDALE FL 32431

TITLE STD  
NAME CRAIN, CHERYL  
STREET ADDRESS 1846 HOLLEY TIMBER ROAD  
CITY-ST-ZIP COTTONDALE FL 32431

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Lori Armenti* LORI ARMENTI

(850) 578-2220

CR2E037 (10/97)

1/5/98

DEP \$61.25