2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

FILED DOCUMENT # N9800001572 Mar 08, 2000 8:00 am 1. Entity Name **Secretary of State** GREYHOUND ADOPTION LEAGUE S/F, INC. 03-08-2000 90007 022 ****61.25 Principal Place of Business Mailing Address 1129 ROYAL PALM BEACH BLVD 1129 ROYAL PALM BEACH BLVD BOX 01 ROX OIL ROYAL PALM BEACH FL 33411-1641 ROYAL PALM BEACH FL 33411 Mailing Address 2. Principal Place of Business .o. Box 22 as Hibiscus DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0825239 Not Applicable Country BEACH Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DYSON, DIANNE 6970 LAKESIDE ROAD W. PALM BEACH FL 33411 Zip Code City F 8. 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 (NQTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CR2E037 (9/99) SECRETARY ☐ Change X Addition TITLE PD ☐ Delete TITLE MARY K. MACCHIA NAME NAME BORCHERT, RAY STREET ADDRESS STREET ADDRESS 10907 HOBART 4128 HIBISCUS CIRCLE CITY-ST-ZIP FU CITY-ST-ZIP ムてミョレダヺ WEST PALM BEACH FL 33409 Change **Addition** TITLE DIRECTOR. ☐ Delete TITLE VD NAME ILENE MIMNAUGH STEPHENSON, PAM NAME 4180 ROYAL PALM BEACH BLUD. STREET ADDRESS STREET ADDRESS **4062 GREENWOOD DRIVE** CITY-ST-ZIF CITY-ST-ZIP ROYAL PAUMBERCH, FU33411 FT. PIERCE FL 34982 Addition Change TITLE TĎ ☐ Delete TITLE NAME DYSON, DIANNE NAME STREET ADDRESS STREET ADDRESS 6970 LAKESIDE ROAD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH_FL 33411 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME DYSON, JERRY STREET ADDRESS STREET ADDRESS 6970 LAKESIDE ROAD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33411 Change ☐ Addition TITLE ☐ Delete WILLARD, DEBRA STREET ADDRESS STREET ADDRESS 11677 BANYAN STREET CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 TITLE ☐ Delete ☐ Change ☐ Addition NAME **BORCHERT, ALICE** NAME STREET ADDRESS STREET ADDRESS 4128 HIBISCUS CIRCLE CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33410 12. Thereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if

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