2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2008
Secretary of State

DOCUMENT# N98000004155

Entity Name: TALLAHASSEE BIG DOG RESCUE, INC.

Current Principal Place of Business:

4728 PIMLICO DR
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

4728 PIMLICO DR
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 59-3517684 **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:

MAXFIELD, DEE ANN B
4728 PIMLICO DR
TALLAHASSEE, FL 32309 US

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:	PT	( ) Delete
Name:	MAXFIELD, DEE ANN B	
Address:	4728 PIMLICO DRIVE	
City-St-Zip:	TALLAHASSEE, FL 32309	
Title:	VS	( ) Delete
Name:	BENTLEY, RITA	
Address:	11 KIINGS RD	
City-St-Zip:	HAVANA, FL 32333	
Title:	D	( ) Delete
Name:	WHITFIELD, BRANDEE	
Address:	2657 NEZ PERCE TRAIL	
City-St-Zip:	TALLAHASSEE, FL 32303	
Title:	MD	( ) Delete
Name:	CONNOLLY, SHEREE	
Address:	380 DOVE LANE	
City-St-Zip:	MONTICELLO, FL 32344	

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

I hereby certify that the information supplied with this filing does not qualify 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: DEE ANN B. MAXFIELD PT 05/13/2008

Electronic Signature of Signing Officer or Director — Date