

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004333

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** HUMANE SOCIETY OF NORTH AMERICA, INC.

**Current Principal Place of Business:**

3505 FORSYTH RD  
WINTER PARK, FL 32792

**New Principal Place of Business:**

1630 SAND KEY CIRCLE  
OVIEDO, FL 32765 US

**Current Mailing Address:**

3505 FORSYTH RD  
WINTER PARK, FL 32792

**New Mailing Address:**

1630 SAND KEY CIRCLE  
OVIEDO, FL 32765 US

**FEI Number:** 59-3523212

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTINEZ, MARGIE  
3505 FORSYTH RD  
WINTER PARK, FL 32792 US

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

MARTINEZ, MARGIE  
1630 SAND KEY CIRCLE  
OVIEDO, FL 32765 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: \_\_\_\_\_

04/29/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MARTINEZ, MARGIE  
Address: 3505 FORSYTH RD  
City-St-Zip: WINTER PARK, FL 32792

Title: D ( ) Delete  
Name: VIRELLA, JESUS  
Address: 713 MEADOWSIDE CT  
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete  
Name: MARTINEZ, AMANDA  
Address: 3505 FORSYTH RD  
City-St-Zip: WINTER PARK, FL 32792

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MARTINEZ, MARGIE  
Address: 1630 SAND KEY CIRCLE  
City-St-Zip: OVIEDO, FL 32765

Title: D (X) Change ( ) Addition  
Name: VIRELLA, JESUS  
Address: 713 MEADOWSIDE CT  
City-St-Zip: ORLANDO, FL 32825 US

Title: D (X) Change ( ) Addition  
Name: MARTINEZ, AMANDA  
Address: 1630 SAND KEY CIRCLE  
City-St-Zip: OVIEDO, FL 32765 US

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: MARGIE MARTINEZ

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date