

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004880

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** ANIMAL SUPPORT KINDNESS & KINSHIP, INC.

**Current Principal Place of Business:**

125 WORTH AVENUE, STE 330  
PALM BCH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2450  
PALM BCH, FL 334802450 US

**New Mailing Address:**

**FEI Number:** 65-0944876

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILKES, HELEN B  
1435 N OCEAN WAY  
PALM BEACH, FL 33480 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: VP ( ) Delete  
Name: WILKES, HELEN B  
Address: 1435 N OCEAN WAY  
City-St-Zip: PALM BCH, FL 33480

Title: T ( ) Delete  
Name: RAYMOND, JR, JOHN J  
Address: 2400 MEDINA WAY  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S ( ) Delete  
Name: HIRSCH, LINDA  
Address: 44 COCOANUT ROW  
City-St-Zip: WEST PALM BEACH, FL 33480

Title: D ( ) Delete  
Name: GORE, LINDA T  
Address: 610 XANADU PLACE  
City-St-Zip: JUPITER, FL 33477

Title: D ( ) Delete  
Name: HENSLEY, JUDY E  
Address: 5409 WOODS WEST DRIVE  
City-St-Zip: LAKE WORTH, FL 33462

Title: D ( ) Delete  
Name: GRAHAM, MICHAEL C  
Address: 325 SOUTH LAKE DRIVE  
City-St-Zip: PALM BEACH, FL 33480

**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:

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: JUDY E HENSLEY

DIR

04/28/2009

Electronic Signature of Signing Officer or Director

Date