## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000062455

Entity Name: PAWS FOR HEALTH, INC.

**FILED** Sep 01, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4588 ASHTON ROAD SARASOTA, FL 34233

**Current Mailing Address: New Mailing Address:** 

4588 ASHTON ROAD SARASOTA, FL 34233

FEI Number: 59-3730225 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DINATALE, ANTHONY N WINEINGER, KEVIN S 4145 CENTER POINTE CIRCLE 7011 PLEASANT HILL ROAD BRADENTON, FL 34203 SARASOTA, FL 34233

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: KEVIN S. WINEINGER 09/01/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition DINATALE, ANTHONY N WINEINGER, KEVIN S Name: Name: 4145 CENTER POINTE CIRCLE 7011 PLEASANT HILL ROAD Address: Address:

City-St-Zip: SARASOTA, FL 34233 City-St-Zip: BRADENTON, FL 34203

Title: Title: () Delete (X) Change ( ) Addition Name: DINATALE, ANTHONY N Name: WINEINGER, KEVIN S 4145 CENTER POINTE CIRCLE 7011 PLEASANT HILL ROAD Address: Address: SARASOTA, FL 34233 BRADENTON, FL 34203 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: () Change () Addition

NARTOWICZ, SUSAN J Name: Name: 737 PINELAND AVENUE Address: Address: City-St-Zip: VENICE, FL 34292 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: KEVIN S. WINEINGER 09/01/2007