

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710083

Entity Name: ST. AUGUSTINE HUMANE SOCIETY

Current Principal Place of Business:

1665 OLD MOULTRIE ROAD
ST. AUGUSTINE, FL 32084-5158

Current Mailing Address:

PO BOX 133
ST. AUGUSTINE, FL 32085

FEI Number: 59-1324680

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, CAROLYN
1665 OLD MOULTRIE ROAD
SAINT AUGUSTINE, FL 32084 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title ED
Name SMITH, CAROLYN S
Address 1665 OLD MOULTRIE ROAD
City-State-Zip: SAINT AUGUSTINE FL 32084

Title PRESIDENT
Name KURTZ, JULIE
Address 32 LITTLE BAY HARBOR DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SECRETARY
Name BATENHORST, KATHERINE
Address 36 ROHDE AVENUE
City-State-Zip: SAINT AUGUSTINE FL 32084

Title TREASURER
Name LAKE, JANICE
Address 210 ST GEORGE STREET #43
City-State-Zip: ST AUGUSTINE FL 32084

Title VP
Name GENOVAR JENSEN, SONYA
Address CATS PAW MARINA
220 NIX BOAT YARD ROAD
City-State-Zip: ST. AUGUSTINE FL 32084

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN S SMITH

ED

02/18/2013

Electronic Signature of Signing Officer/Director Detail

Date