

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730565

Entity Name: ANIMAL WELFARE SOCIETY OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**2601 SW 27TH AVENUE
MIAMI, FL 33133**Current Mailing Address:**2601 SW 27 AVE
MIAMI, FL 33133 US**FEI Number:** 59-1557645**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLANAGAN, JEFFREY M ESQ.
2601 SW 27TH AVENUE
MIAMI, FL 33133 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:** JEFFREY M. FLANAGAN

03/05/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PASCIAK, PETER
Address 2601 SW 27TH AVENUE
City-State-Zip: MIAMI FL 33133

Title PRES
Name BLEEMER, RENEE
Address 2601 SW 27 AVE
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name CHAPPELL, CATHIE
Address 2601 SW 27 AVE
City-State-Zip: MIAMI FL 33133

Title VP
Name TOTINO, EMILY
Address 2601 SW 27 AVE
City-State-Zip: MIAMI FL 33133

Title SECRETARY
Name WEEKS, BARBARA
Address 2601 SW 27 AVE
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name DRINKWATER, WILLIAM
Address 2600 SW 27TH AVENUE
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name PEREZ, ELIZABETH
Address 2601 SW 27TH AVENUE
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name BELMONT, HEATHER DR.
Address 2601 SW 27TH AVENUE
City-State-Zip: MIAMI FL 33133

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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: RENEE BLEEMER

PRESIDENT

03/05/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HORWITZ, JANET
Address 2601 SW 27TH AVENUE
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name NAPIER, BARBARA
Address 2601 SW 27TH AVENUE
City-State-Zip: MIAMI FL 33133