

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007909

Entity Name: ANIMAL SERVICES LEAGUE, INC.

Current Principal Place of Business:

735 E.C. 470
LAKE PANASOFFKEE, FL 33538

Current Mailing Address:

P O BOX 93
BUSHNELL, FL 33513

FEI Number: 38-1754963

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MURPHY, DAVID J
14217 THIRD STREET
DADE CITY, FL 33525 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 D
Name FOLEY-CREECH, JOCELYN W
Address 4993 COUNTY ROAD 683
City-State-Zip: WEBSTER FL 33597

Title D
Name FOLEY, ALLEN
Address 1979 WEST END PL.
City-State-Zip: ORANGE PARK FL 32003

Title D
Name ERLER, MYRNA
Address 5124 C.R. 326
City-State-Zip: BUSHNELL FL 33513

Title SECRETARY
Name SCHOTT, PATRICIA A
Address 1012 CR 437
City-State-Zip: LAKE PANASOFFKEE FL 33538

Title D
Name FOLEY, JOANNE E
Address 13326 SW 49TH PLAZA
City-State-Zip: WEBSTER FL 33597

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: JOANNE FOLEY

D

01/31/2017

Electronic Signature of Signing Officer/Director Detail

Date