2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009084

Entity Name: ANIMAL RESCUE FORCE OF SOUTH FLORIDA, INC.

FILED Apr 12, 2022 **Secretary of State** 2590246396CC

Current Principal Place of Business:

5115 SOUTH DIXIE HIGHWAY WEST PALM BEACH. FL 33405

Current Mailing Address:

5115 SOUTH DIXIE HIGHWAY WEST PALM BEACH. FL 33405 US

FEI Number: 20-3420468 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSON, KRISTIN 13128 43RD ROAD NORTH ROYAL PALM BEACH, FL 33411 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: KRISTIN LARSON 04/12/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR LARSON, KRISTIN POORE, DANA Name Name

13128 43RD ROAD NORTH 17256 BOCA CLUB BLVD. Address Address

BOCA RATON FL 33437

City-State-Zip:

ROYAL PALM BEACH FL 33411 City-State-Zip:

Title **TREASURER** Title

OKEAN, LINDA Name Name CERBONE, DALTON

Address 10194 WILLOW LANE 3012 VINCENT RD. Address

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: WEST PALM BEACH FL 33405

Title **DIRECTOR** Title RECORDING SECRETARY

Name DEAVERS, PATRICIA Name CORVINO. JENNIFER Address 23 MISTY MEADOW DR. Address 9781 LAKEVIEW LANE City-State-Zip: BOYNTON BEACH FL 33436

City-State-Zip: PARKLAND FL 33076

Title CORRESPONDING SECRETARY Title DIRECTOR

REITER, ABBY Name Name RUSSO, CAROL

Address 111 LAKE AVE. Address 4507 NW 3RD DRIVE #6

DELRAY BEACH FL 33445 City-State-Zip: City-State-Zip: LAKE WORTH FL 33460

Continues on page 2

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.

04/12/2022 SIGNATURE: STEFFANI T. MARTIN FILING AGENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name PEICHEL, WENDY

Address 4982 GARDEN DRIVE

City-State-Zip: DELRAY BEACH FL 33445