

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010388

Entity Name: THE EMILY VERNON FOUNDATION FOR HOMELESS AND ABUSED ANIMALS INC.

Current Principal Place of Business:

5315 SOUTH SHORE BLVD.
WELLINGTON, FL 33449

Current Mailing Address:

BELLER SMITH, PL
2101 NW CORPORATE BLVD. #316
BOCA RATON, FL 33431

FEI Number: 20-3597800

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELLER, AMY B
BELLER SMITH, P.L.
2101 NW CORPORATE BLVD. #316
BOCA RATON, FL 33431 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 PD
Name SCANLON, TIMOTHY
Address 5315 SOUTH SHORE BLVD.
City-State-Zip: WELLINGTON FL 33449

Title DIRECTOR
Name THOMAS , SCANLON
Address 1590 RIVERWOOD LANE
City-State-Zip: CORAL SPRINGS FL 33071

Title DIRECTOR
Name CALI , JOSEPH
Address 169 BENNETT AVENUE
City-State-Zip: STATEN ISLAND NY 10314

Title VPTD
Name SCANLON, SHARON
Address 5315 SOUTH SHORE BLVD.
City-State-Zip: WELLINGTON FL 33449

Title D
Name MENDEZ, EDWIN
Address 6405 EVANS STREET
City-State-Zip: HOLLYWOOD FL 33024

Title DIRECTOR
Name GIOVINCO, ARIEL
Address 13527 BARCELONA LAKE CIRCLE
City-State-Zip: DELRAY BEACH FL 33446

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: TIMOTHY SCANLON

PD

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date