#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001716

Entity Name: ANIMAL SHELTER FOUNDATION, INC.

Feb 05, 2016 Secretary of State CC5495209547

**FILED** 

### **Current Principal Place of Business:**

1206 WALTON DRIVE TALLAHASSEE. FL 32312

## **Current Mailing Address:**

P.O. BOX 13858

TALLAHASSEE, FL 32317

FEI Number: 56-2643835 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MACFALL, KATE 1206 WALTON DRIVE TALLAHASSEE, FL 32312 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.

SC

SIGNATURE:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PD Title

NameDAVINO, MICHAELNameWHARTON, ALLISONAddressP.O. BOX 13858AddressP.O. BOX 13858

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title ASST. TREASURER Title VP

NameFOWLER, CARANamePERLMAN, LAURENAddressP.O. BOX 13858AddressP.O. BOX 13858

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title TREASURER

Name WHITE, DAVID

Address PO BOX 13858

City-State-Zip: TALLAHASSEE FL 32317

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: CARA FOWLER ASST TREASURER

02/05/2016

Electronic Signature of Signing Officer/Director Detail

Date