

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N1000002311

**FILED**  
**Apr 13, 2013**  
**Secretary of State**  
**CC2761979634**

**Entity Name:** ELIZABETH'S ANIMAL RESCUE & SANCTUARY, INC.

**Current Principal Place of Business:**

1644 ALTAMONT LN.  
ODESSA, FL 33556

**Current Mailing Address:**

1644 ALTAMONT LN.  
ODESSA, FL 33556

**FEI Number: 27-1899905**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LAMBERT, SUSAN D  
1630 ALTAMONT LN  
ODESSA, FL 33556 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 P  
Name LAMBERT, SUSAN D  
Address 1630 ALTAMONT LN.  
City-State-Zip: ODESSA FL 33556

Title V  
Name LAMBERT, BUEL  
Address 1630 ALTAMONT LN.  
City-State-Zip: ODESSA FL 33556

Title T  
Name DAVIES, HAZEL  
Address 1644 ALTAMONT LN.  
City-State-Zip: ODESSA FL 33556

*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: SUSAN LAMBERT**

**PRESIDENT**

**04/13/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date