## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000002871

Entity Name: HELPFOURPAWS, INC.

**Current Principal Place of Business:** 

1254 COPPER CREEK DRIVE TALLAHASSEE, FL 32311

**Current Mailing Address:** 

1254 COPPER CREEK DRIVE TALLAHASSEE, FL 32311 US

FEI Number: 27-2244877 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUCE, MARCIA SUE 1254 COPPER CREEK DRIVE TALLAHASSEE, FL 32311 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: MARCIA SUE BRUCE 04/21/2015

Electronic Signature of Registered Agent

Date

FILED Apr 21, 2015

**Secretary of State** 

CC7965521006

Officer/Director Detail:

Title DIRECTOR Title OFFICER

Name BRUCE, MARCIA SUE Name MAXWELL, HARRIET TERHURNE

Address 1254 COPPER CREEK DRIVE Address 612 MARTIN STREET

City-State-Zip: TALLAHASSEE FL 32311 City-State-Zip: TALLAHASSEE FL 32308

Title SECRETARY

Name ASCANI, BARBARA

Address P. O. BOX 832

City-State-Zip: ALACHUA FL 32616

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: MARCIA SUE BRUCE

Electronic Signature of Signing Officer/Director Detail

**DIRECTOR** 

04/21/2015

Date