

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010288

Entity Name: DOGS IN CRISIS, INC.**Current Principal Place of Business:**1510 NE 11TH STREET
HOMESTEAD, FL 33033**Current Mailing Address:**1510 NE 11TH STREET
HOMESTEAD, FL 33033 US**FEI Number:** 46-1180600**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RUSSO, LAURA LESQ
2655 LEJEUNE RD SUITE PH 2-B
CORAL GABLES, FL 33134 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	SPADARO, AMY LYNN
Address	1510 NE 11TH STREET
City-State-Zip:	HOMESTEAD FL 33033

Title	VP
Name	SANDERS, LESLIE
Address	121 NW 20TH STREET
City-State-Zip:	HOMESTEAD FL 33030

Title	STD
Name	HART, GORGEINE
Address	14374 SW 97TH TERR
City-State-Zip:	MIAMI FL 33186

Title	DIRECTOR
Name	FRITZ, BETTY
Address	28502 SW 147CT
City-State-Zip:	HOMESTEAD FL 33033

Title	DIRECTOR
Name	MITCHELL, JAN
Address	16241 SW 282ND ST
City-State-Zip:	HOMESTEAD FL 33031

Title	DIRECTOR
Name	OLDACRE, SUE
Address	1441 NE 11TH STREET
City-State-Zip:	HOMESTEAD FL 33033

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: AMY SPADARO**PRESIDENT****04/15/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date