

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000002879

**Entity Name:** ISLAND PAWS RESCUE, INC.

**Current Principal Place of Business:**

1151 SOUTHEAST 9TH TERRACE  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

PO BOX 10593  
POMPANO BEACH, FL 33061 US

**FEI Number:** 46-2382155

**Certificate of Status Desired:** No

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

ITKIN, SCOTT E  
5001 SOUTH UNIVERSITY DRIVE  
SUITE B  
DAVIE, FL 33328 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 D/C  
Name JACOBS, JOHANNA  
Address P.O. BOX 10593  
City-State-Zip: POMPANO BEACH FL 33061

Title DIRECTOR  
Name RAPHAEL, LINDSAY  
Address PO BOX 10593  
City-State-Zip: POMPANO BEACH FL 33301

Title D  
Name MELILLO, KELLY  
Address GENERAL DELIVERY  
City-State-Zip: BIMINI, BAHAMAS

*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: JOHANNA JACOBS

DIRECTOR

01/19/2023

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

\_\_\_\_\_  
Date