

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000001339

**Entity Name:** EVERGLADES ANGELS DOG RESCUE INC.

**Current Principal Place of Business:**

2637 EAST ATLANTIC BLVD. #269  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

2637 EAST ATLANTIC BLVD. #269  
POMPANO BEACH, FL 33062 US

**FEI Number:** 46-4812463

**Certificate of Status Desired:** No

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

CAPPILLINO, CATHY  
715 NE 24 AVE  
POMPANO BEACH, FL 33062 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 PS  
Name CAPPILLINO, CATHY  
Address 2637 EAST ATLANTIC BLVD. #269  
City-State-Zip: POMPANO BEACH FL 33062

Title VT  
Name SMITH, BEVERLEY A  
Address 2637 EAST ATLANTIC BLVD. #269  
City-State-Zip: POMPANO BEACH FL 33062

Title D  
Name GORRONDONA, ADRIANA  
Address 2637 E ATLANDTIC BLVD., #269  
City-State-Zip: POMPANO BEACH FL 33062

Title D  
Name GUEVARA, DENISE  
Address 2637 E ATLANDTIC BLVD., #269  
City-State-Zip: POMPANO BEACH FL 33062

*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:** CATHY CAPPILLINO

**PRESIDENT**

**03/31/2017**

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

\_\_\_\_\_  
Date