| Current Mailing Address: | | | | |
|--|--|-----------------|-----------------------------------|------------|
| 6010 STANDING OAKS LANE NAPLES, FL 34119 US | | | | |
| FEI Number | : 81-5257591 | | Certificate of Status Desired: No | |
| Name and Address of Current Registered Agent: | | | | |
| ALLARD, C 6010 STANDING OAKS LANE NAPLES, FL 34119 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 | CRAIG ALLARD | | | 04/16/2020 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | D | Title | D | |
| Name | ALLARD, C | Name | ALLARD, G | |
| Address | 6010 STANDING OAKS LANE | Address | 6010 STANDING OAKS LANE | |
| City-State-Zip: | NAPLES FL 34119 | City-State-Zip: | NAPLES FL 34119 | |
| Title | D | Title | D | |
| Name | NELSON, CORRIE | Name | PERCOPE, ROBERT | |
| Address | 310 20TH STREET S.E. | Address | 6325 WILSHIRE PINES CIR | |
| City-State-Zip: | NAPLES FL 34117 | City-State-Zip: | NAPLES FL 34109 | |
| | | | | |

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: ALLARD, C

Electronic Signature of Signing Officer/Director Detail

04/16/2020

FILED Apr 16, 2020 Secretary of State 9578985944CC

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000012223

Entity Name: ZEN ANIMAL SANCTUARY AND ADOPTION CENTER, INC.

Current Principal Place of Business:

6010 STANDING OAKS LANE NAPLES, FL 34119

rront Mailing Address

Date