

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N18000006145

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

**Current Principal Place of Business:**

794 24TH AVE. NORTH  
ST. PETERSBURG, FL 33704

**Current Mailing Address:**

794 24TH AVE NORTH  
SAINT PETERSBURG, FL 33704 US

**FEI Number:** 83-0825465

**Certificate of Status Desired:** No

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

MONTENEGRO, ELIZABETH  
1625 46TH AVE N  
ST. PETERSBURG, FL 33714 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:** ELIZABETH MONTENEGRO

12/13/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name SHAUL, ARTHUR  
Address 794 24TH AVE. NORTH  
City-State-Zip: ST. PETERSBURG FL 33704  
  
Title DIRECTOR  
Name SHOEMAKER, ALEXIS  
Address 7400 MEADOWLAWN DR NORTH  
City-State-Zip: SAINT PETERSBURG FL 33702

Title D  
Name DEGRAZIA, SUZETTE  
Address 165 20TH AVE. NE  
City-State-Zip: ST. PETERSBURG FL 33704  
  
Title DIRECTOR  
Name MONTENEGRO, ELIZABETH  
Address 1625 46TH AVE NORTH  
City-State-Zip: SAINT PETERSBURG FL 33714

*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:** ELIZABETH MONTENEGRO

**DIRECTOR**

12/13/2019

Electronic Signature of Signing Officer/Director Detail

Date