

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

DOCUMENT# N19000010533

**Entity Name:** EQUINE WELFARE NETWORK INC.

**Current Principal Place of Business:**

6955 5TH STREET SW  
VERO BEACH, FL 32968

**Current Mailing Address:**

6955 5TH STREET SW  
VERO BEACH, FL 32968 US

**FEI Number: 84-3283813**

**Certificate of Status Desired:** No

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

KANNER, CAMILLE  
6955 5TH STREET SW  
VERO BEACH, FL 32968 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 P  
Name KANNER, CAMILLE  
Address 6955 5TH STREET SW  
City-State-Zip: VERO BEACH FL 32968

*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: CAMILLE KANNER**

**PRESIDENT**

**01/29/2023**

Electronic Signature of Signing Officer/Director Detail

Date