

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000004982

**Entity Name:** RESCUE GARDEN, INC.

**Current Principal Place of Business:**

605 HIGHVIEW TERRACE SOUTH  
BRANDON, FL 33510

**Current Mailing Address:**

605 HIGHVIEW TERRACE SOUTH  
BRANDON, FL 33510

**FEI Number:** 85-0976263

**Certificate of Status Desired:** No

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

BUMSTEAD, JONA S  
605 HIGHVIEW TERRACE SOUTH  
BRANDON, FL 33510 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 BUMSTEAD, JONA S  
Address 605 HIGHVIEW TERRACE SOUTH  
City-State-Zip: BRANDON FL 33510

Title D  
Name DOWSETT, MARK R  
Address 605 HIGHVIEW TERRACE SOUTH  
City-State-Zip: BRANDON FL 33510

Title D  
Name HADLEY, BEVERLY J  
Address 816 WEST SPRING DRIVE  
City-State-Zip: NEWAYGO MI 49337

Title S  
Name STURRUS, CHERILYN M  
Address 1385 WEST 48TH STREET  
City-State-Zip: FREMONT MI 49412

Title T  
Name BUMSTEAD, JON C  
Address 2186 EAST 72ND STREET  
City-State-Zip: NEWAYGO MI 49337

Title D  
Name NICKERSON, BELINDA J  
Address 121 MAIN STREET  
City-State-Zip: NEWAYGO MI 49337

*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:** JONA S BUMSTEAD

**PRESIDENT**

**04/02/2024**

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

\_\_\_\_\_  
Date