

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005254

Entity Name: SAVE OUR STRAYS, INC.**Current Principal Place of Business:**2495 MADRID AVE.
SAFETY HARBOR, FL 34695**Current Mailing Address:**PO BOX 1051
SAFETY HARBOR, FL 34695 US**FEI Number:** 59-3274561**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARTNETT, LINDA
2495 MADRID AVE.
SAFETY HARBOR, FL 34695 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:** ROBIN A BERRYMAN

01/15/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, DIRECTOR
Name HARTNETT, LINDA
Address PO BOX 1051
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR
Name JOHNSON, DONNA
Address P. O. BOX 1051
City-State-Zip: SAFETY HARBOR FL 34695

Title PRESIDENT, DIRECTOR
Name THOMPSON, ELIZABETH
Address PO BOX 1051
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR
Name HARTNETT, JOHN
Address PO BOX 1051
City-State-Zip: SAFETY HARBOR FL 34695

Title SECRETARY, DIRECTOR
Name ROSS, DIANA
Address PO BOX 1051
City-State-Zip: SAFETY HARBOR FL 34695

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: LINDA HARTNETT**TREASURER, DIRECTOR** 01/15/2015

Electronic Signature of Signing Officer/Director Detail

Date