2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004058

Entity Name: ANIMAL NETWORK INC.

Current Principal Place of Business:

610 IXORA AVE ELLENTON. FL 34222 FILED Feb 23, 2017 Secretary of State CC7800000985

Current Mailing Address:

610 IXORA AVE

ELLENTON, FL 34222 US

FEI Number: 59-3591574 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOLZE, SUE 610 IXORA AVE ELLENTON, FL 34222 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: SUE KOLZE 02/23/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title T/D

 Name
 KOLZE, SUE
 Name
 CRAWFORD, WENDY

 Address
 610 IXORA AVE
 Address
 9217 29TH ST EAST

 City-State-Zip:
 ELLENTON FL 34222
 City-State-Zip:
 PARRISH FL 34219

Title VP/D Title SEC

NameCRAWFORD, LAURIENameSAMPSON, JOANNEAddress1705 58TH AVE DR WAddress2830 33RD AVE DR WCity-State-Zip:BRADENTON FL 34207City-State-Zip:BRADENTON FL 34205

Title BOD Title BOD-BUSINESS DEV

Name STARR, DEBRA Name HUTCHISON, WILLIAM L+++++

Address 4523 PALMETTO POINT DR Address 748 OAKFORD DRIVE
City-State-Zip: PALMETTO FL 34221 City-State-Zip: SARASOTA FL 34240

Title BOD Title BOD

NameWALRAVEN, SCOTT ANameBOYER, RITA KAYAddress3104 48TH AVENUE DRIVE WESTAddress1705 58TH AVE DR WCity-State-Zip:BRADENTON FL 34207City-State-Zip:BRADENTON FL 34207

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: WENDY J CRAWFORD TREASURER 02/23/2017