

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006427

**Entity Name:** THE PET PROJECT FOR PETS, INC.**Current Principal Place of Business:**2200 NW 9TH AVENUE  
WILTON MANORS, FL 33311**Current Mailing Address:**2200 NW 9TH AVENUE  
WILTON MANORS, FL 33311 US**FEI Number: 37-1440098****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARTINO, SUSAN A  
279 S TRADEWINDS  
FT LAUDERDALE, FL 33308 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	ED
Name	MARTINO, SUSAN A
Address	279 S TRADEWINDS AVE
City-State-Zip:	FT LAUDERDALE FL 33308

Title	DIRECTOR
Name	GALLUCCIO, PAUL A
Address	17550 E LAS OLAS BLVD 401
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	DIRECTOR
Name	HEDRICK, SONIA
Address	2420 SW 14TH COURT
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIRECTOR
Name	BERGMANN, DEIDRA
Address	402 NW 118TH TERRACE
City-State-Zip:	CORAL SPRINGS FL 33071

Title	DIRECTOR
Name	CAMARDELLO, MICHAEL DR.
Address	2023 NE 6TH TERRACE
City-State-Zip:	WILTON MANORS FL 33305

Title	DIRECTOR
Name	SHAPIRO, DAVID
Address	9188 MAGNOLIA COURT
City-State-Zip:	DAVIE FL 33328

*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: SUSAN MARTINO****EXECUTIVE DIRECTOR****01/15/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date