

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000000615

**Entity Name:** 400 PAWS, INC.

**Current Principal Place of Business:**

6933 ANGUS LN  
MOLINO, FL 32577

**Current Mailing Address:**

6933 ANGUS LN  
MOLINO, FL 32577

**FEI Number:** 46-4830181

**Certificate of Status Desired:** No

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

CHENEY, KIMBERLY  
6933 ANGUS LN  
MOLINO, FL 32577 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 D, PRESIDENT  
Name CHENEY, KIMBERLY  
Address 6933 ANGUS LN  
City-State-Zip: MOLINO FL 32577

Title D, VICE PRESIDENT  
Name CHENEY, LAUREN  
Address 6878 CEDAR LAKE DRIVE  
City-State-Zip: PENSACOLA FL 32526

Title D, TREASURER  
Name WILLIAMS, CINDY  
Address 20291 SWEETWATER LOOP  
City-State-Zip: SEMINOLE AL 36571

Title D, SECRETARY  
Name BARRY, RONI  
Address 5284 HWY 29 N  
City-State-Zip: MOLINO FL 32577

Title D  
Name HENRY, TOWANA  
Address 3066 WALLACE LAKE RD.  
City-State-Zip: PACE FL 32571

*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:** KIMBERLY CHENEY

**PRESIDENT**

**03/09/2016**

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

\_\_\_\_\_  
Date