

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23272

Entity Name: CANINE COMPANIONS FOR INDEPENDENCE, INC.

Current Principal Place of Business:

2965 DUTTON AVENUE
SANTA ROSA, CA 95407

Current Mailing Address:

P.O. BOX 446
SANTA ROSA, CA 95402 US

FEI Number: 94-2494324

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 CFO
Name FEINNE, ALAN
Address 1404 GOLD WAY
City-State-Zip: ROHNERT PARK CA 94928

Title CEO
Name MUNDELL, PAUL
Address 16860 BURL LANE
City-State-Zip: BODEGA CA 94922

Title TREASURER
Name STREET, BOB
Address 2965 DUTTON AVENUE
City-State-Zip: SANTA ROSA CA 95407

Title DIRECTOR
Name GRAHAM, BARRIE
Address 2965 DUTTON AVENUE
City-State-Zip: SANTA ROSA CA 95407

Title DIRECTOR
Name HOPEN, JOHN
Address 2965 DUTTON AVENUE
City-State-Zip: SANTA ROSA CA 95407

Title SECRETARY
Name PERRY, PAULINE
Address 2965 DUTTON AVENUE
City-State-Zip: SANTA ROSA CA 95407

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: PAULINE PERRY

SECRETARY

03/02/2016

Electronic Signature of Signing Officer/Director Detail

Date