

Florida Department of Agriculture and Consumer Services
Division of Consumer Services



**NICOLE "NIKKI"
FRIED
COMMISSIONER**

**SMALL CHARITABLE ORGANIZATIONS/SPONSORS REGISTRATION
APPLICATION**

Solicitation of Contributions Act
Chapter 496, Florida Statutes
Rule 5J-7.004, Florida Administrative Code

1-800-HELP-FLA (435-7352)
850-410-3800 *Calling Outside Florida*
www.800helpfla.com • 850-410-3804 *Fax*

**NO FEE
REQUIRED**

All documents and attachments submitted with this application are subject to public review pursuant to Chapter 119, F.S.

Business Information

Legal Name: PAWS FOR PUTNAM, INC
FEIN: 83-3055521
Business Phone: 904-803-5488
Business Address: 4880 FROST LAKE DRIVE
JACKSONVILLE Florida 32258
Mailing Address: 4880 FROST LAKE DRIVE
JACKSONVILLE Florida 32258
Email Address: pawsforputnam.bobt@gmail.com
Website Address: www.pawsforputnam.org
Fictitious Names** Not Applicable

**All fictitious names must be registered with the Division of Corporations. If business is a corporation then 'Name' is the legal name of the business as listed with the Division of Corporations. You must list all names under which you intend to do business.

Business Details

Month/Day fiscal year ends: 12/31

Organization's Internal Revenue Service Status: Pending

Purpose of the Organization:

Humanely end the deaths of adoptable animals, primarily dogs and cats who make up the largest intake of animals into Putnam County Animal Control. We seek to accomplish this through grants and programs aimed at promoting and supporting spay/neuter initiatives and educating the public on the importance of such programs. We also seek to reduce the surrendering of pets through education, training and sharing resources.

Purpose for which the contributions are used:

We are organized exclusively for charitable and educational purposes. Contributions will be used for grants and programs promoting and supporting spay/neuter, educating the public through events and reducing the surrendering of pets. The animals within the shelter deserve our utmost attention by making their stay brief, healthy and comfortable. This includes providing medical and preventive care as deemed appropriate. Off-site adoptions will be a major goal for us as we get more pets seen.

Personnel Information

Officer 1

Name: Michelle M Merrell
In Charge of Distribution
Title: In Charge of Solicitation
President
Phone: 904-260-9282
Address: 4880 Frost Lake Drive
Jacksonville Florida 32258

Criminal History Questions

1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] **No**
2. Has this person been convicted of, found guilty of, pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony, or crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, misappropriation of property, or any crime arising from the conduct of a solicitation for a charitable organization or sponsor within the last 10 years? [s. 496.405(2)(d)5, F.S.] **No**
3. Has this person been enjoined from violating any law relating to a charitable solicitation? [s. 496.405(2)(d)6, F.S.] **No**

Officer 2

Name: Kay C Dinkla
Title: Vice President
Phone: 386-972-2828
Address: 139 E Dogwood Road
Florahome Florida 32140

Criminal History Questions

1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] **No**
2. Has this person been convicted of, found guilty of, pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony, or crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, misappropriation of property, or any crime arising from the conduct of a solicitation for a charitable organization or sponsor within the last 10 years? [s. 496.405(2)(d)5, F.S.] **No**
3. Has this person been enjoined from violating any law relating to a charitable solicitation? [s. 496.405(2)(d)6, F.S.] **No**

Officer 3

Name: Robert R Thomas
Title: Secretary
Phone: 386-328-2761
Address: 552 Cedar Creek Road
Palatka Florida 32177

Criminal History Questions

1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] **No**
2. Has this person been convicted of, found guilty of, pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony, or crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, misappropriation of property, or any crime arising from the conduct of a solicitation for a charitable organization or sponsor within the last 10 years? [s. 496.405(2)(d)5, F.S.] **No**
3. Has this person been enjoined from violating any law relating to a charitable solicitation? [s. 496.405(2)(d)6, F.S.] **No**

Officer 4

Name: Rebecca A Cummins
Title: Treasurer
Phone: 904-803-5488
Address: 7021 Pine Breeze Ln
 Saint Augustine Florida 32086

Criminal History Questions

1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] **No**
2. Has this person been convicted of, found guilty of, pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony, or crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, misappropriation of property, or any crime arising from the conduct of a solicitation for a charitable organization or sponsor within the last 10 years? [s. 496.405(2)(d)5, F.S.] **No**
3. Has this person been enjoined from violating any law relating to a charitable solicitation? [s. 496.405(2)(d)6, F.S.] **No**

Financial Statement

Fiscal year ending: 12/31/2019
Financial statement source: Budget (Newly formed organizations only)

Budget (Newly formed organizations only)

Revenues

1. Contributions, gifts, grants, and similar amounts received 2,500
2. Government grants (must list sources and amounts) 0
3. Inventory sales
 - a. Gross Revenue 0
 - b. Less costs 0
 - c. Net Income 0
4. Special fundraising events
 - a. Gross revenue 0
 - b. Less expenses 0
 - c. Net Income 0

5.	In-Kind contributions and services	0
6.	Federated campaigns (must list sources and amounts)	0
7.	Program service revenue	0
8.	Membership dues and assessments	0
9.	Other revenue(must list sources and amounts)	0
10.	TOTAL REVENUE(add lines 1 through 9)	2,500

Expenses

1.	Program services(including payments to affiliates)	0
2.	Management and general	0
3.	Fundraising	0
4.	TOTAL EXPENSES(add lines 1,2, and 3)	0

Supporting Documents(List of Sources and Amounts)

Not Applicable

Application Questionnaire

Did the charitable organization or sponsor receive \$25,000 or more in total revenue during the immediately preceding fiscal year?: No

Are the fundraising activities of the charitable organization or sponsor carried on by any compensated volunteers, members, or officers ?: No

Are any part of the assets or income of the organization or sponsor inured to the benefit of or paid to any officer or member?: No

Does the charitable organization or sponsor utilize a professional fundraising consultant, professional solicitor, or commercial co-venture?: No

Preparer Information

First Name: Rebecca
Last Name: Cummins
Phone Number: 904-803-5488

Signature Information

* I declare under penalty of perjury that all of the information provided in this application and in any exhibits attached hereto, is true and correct.

and further state as follows:

- * I certify that I am authorized to complete this application and the information provided is true and accurate. The above information is provided for the purpose of complying with the provisions of Chapter 496, Florida Statutes.
- * I certify that the above named charitable organization or sponsor has less than \$25,000 in total revenue (including contributions).
- * I certify that the fundraising activities of the above named charitable organization or sponsor are carried

on by volunteers, members, or officers who are not compensated and no part of the assets or income of the organization or sponsor inures to the benefit of or is paid to any officer or member of the above named charitable organization or sponsor.



I certify that the above named charitable organization or sponsor does not utilize a professional fundraising consultant, professional solicitor, or commercial co-venturer.

Signature Name: Rebecca Cummins

Signature Date: 12/13/2019