

1.) CORPORATION NAME:

**PETsMART Charities, Inc.**

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1267618**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**AZ**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 19601 North 27th Ave

CITY/ST/ZIP: Phoenix, AZ 85027

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: PHILIP FRANCIS TITLE: CHAIRMAN ADDRESS: 19601 North 27th Ave CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SUSAN GULIG TITLE: TREASURER ADDRESS: 19601 North 27th Ave CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JAYE PERRICONE TITLE: Vice-Chair ADDRESS: 19601 North 27th Ave CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DONNA FLEISCHER TITLE: DIRECTOR ADDRESS: 19601 North 27th Ave CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Herbert Baum TITLE: DIRECTOR ADDRESS: 19601 North 27th Ave CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Donald Beaver TITLE: DIRECTOR ADDRESS: 19601 North 27th Ave CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Philip Bushby DIRECTOR 19601 North 27th Ave Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Ashley Dobbs DIRECTOR 19601 North 27th Ave Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Brenda Gray DIRECTOR 19601 North 27th Ave Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Steve Marton DIRECTOR 19601 North 27th Ave Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Elizabeth McLaughlin DIRECTOR 19601 North 27th Ave Phoenix, AZ 85027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Susana Della Maddalena Exec. Director 19601 North 27th Ave Phoenix, AZ 85027	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeremiah Beitzel SECRETARY 19601 North 27th Ave Pheonix, AZ 85027	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ Jeremiah Beitzel SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Jeremiah Beitzel, SECRETARY PRINTED NAME AND CORPORATE TITLE	10/1/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			