

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006007

FILED  
Apr 13, 2008  
Secretary of State

**Entity Name:** GENESIS 1:28, FELINE ADOPTION PROGRAM, INC.

**Current Principal Place of Business:**

461 PABLO POINT DRIVE  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

461 PABLO POINT DRIVE  
JACKSONVILLE, FL 32225

**New Mailing Address:**

**FEI Number:** 59-3540451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERRONE, LORETTA  
461 PABLO POINT DRIVE  
JACKSONVILLE, FL 32225 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PERRONE, LORETTA  
Address: 461 PABLO POINT DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: PERRONE, MICHAEL J  
Address: 720 NORTH EDENBRIDGE WAY  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D ( ) Delete  
Name: KRAMER, TIFFANY  
Address: 2528 LOURDES DR., WEST  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORETTA PERRONE

DIR

04/13/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date