## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000002328

**Entity Name: KITTEN'S NEEDLE INC** 

**Current Principal Place of Business:** 

3336 SHALLOT DR **UNIT 101** ORLANDO, FL 32835

**FILED** Feb 27, 2016 **Secretary of State** CC3078476987

## **Current Mailing Address:**

3336 SHALLOT DR **UNIT 101** ORLANDO, FL 32835 US

FEI Number: 46-5171648 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

LOUICIUS, ALISHA S 3336 SHALLOT DR **UNIT 101** ORLANDO, FL 32835 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 Title COO

Name LOUICIUS, ALISHA S Name LOUICIUS, SHERON P

3336 SHALLOT DR UNIT 101 3336 SHALLOT DR UNIT 101 Address Address

City-State-Zip: ORLANDO FL 32835 ORLANDO FL 32835 City-State-Zip:

**DIRECTOR** Title Title Name BURKE, JOHN Name BATIE, KRYSTAL D

Address 3336 SHALLOT DR Address 1904 OLE HERITAGE DR

**UNIT 101** 

ORLANDO FL 32839 City-State-Zip: City-State-Zip: ORLANDO FL 32835

**CFO** Title

Name LOUICIUS, ALPHONSE

Address 3336 SHALLOT DR

**UNIT 101** 

ORLANDO FL 32835 City-State-Zip:

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: ALISHA LOUICIUS CEO

Electronic Signature of Signing Officer/Director Detail

Date

02/27/2016