


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 24, 2006 8:00 am**  
**Secretary of State**

08-24-2006 90064 006 \*\*\*\*70.00

<b>DOCUMENT # F04000007205</b> 1. Entity Name ALLEY CAT ALLIES, INC.	
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Principal Place of Business 7920 NORFOLK AVE. SUITE 600 BETHESDA, MD 20814-2525 US	Mailing Address 7920 NORFOLK AVE. SUITE 600 BETHESDA, MD 20814-2525 US
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**DO NOT WRITE IN THIS SPACE**

08152006 No Chg-NP CR2E037 (4/06)

4. FEI Number 52-1742079	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25</b> <b>Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	WILCOX, DONNA
STREET ADDRESS	7920 NORFOLK AVE., SUITE 600
CITY - ST - ZIP	BETHESDA, MD 208142525
TITLE	ST
NAME	ROBINSON, BECKY
STREET ADDRESS	7920 NORFOLK AVE., SUITE 600
CITY - ST - ZIP	BETHESDA, MD 208142525
TITLE	PLEASE SEE ATTACHED LIST
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donna S. Shiles 8/15/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT



*The National Feral Cat Resource*

40101895

#F04000007205

## Board of Directors and Principal Salaried Executives

Rebecca Robinson  
Treasurer  
Principal Salaried Employee: National Director  
4801 N 20<sup>th</sup> Street  
Arlington, VA 22207  
703-243-7014

Donna Wilcox  
President  
Principal Salaried Employee: Executive Director  
4953 Crescent Street  
Bethesda, MD 20816  
301-229-9263

Beth Ayres  
Board Member  
2923 Foxhall Rd. NW  
Washington, DC 20016  
202-966-2868

Karyen Chu  
Board Member  
1400 East West Hwy. #1519  
Silver Spring, MD 20910  
415-370-4122

Tamara Kukla  
Secretary  
3001 Park Center Drive, Apt. 1417  
Alexandria, VA 22302  
703-407-6898

Eric Raphael  
Board Member  
104 Cheshire Lane  
McMurray, PA 15317  
412-841-5250