

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003999

FILED
Apr 30, 2012
Secretary of State

Entity Name: OPERATION CATNIP OF GAINESVILLE, INC.

Current Principal Place of Business:

2015 SW 16TH AVE
GAINESVILLE, FL 32610

New Principal Place of Business:

4205 NW 6TH STREET
GAINESVILLE, FL 32609

Current Mailing Address:

PO BOX 141023
GAINESVILLE, FL 32614

New Mailing Address:

FEI Number: 59-3522373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLMSTEAD, SHAYE M
807 NW 41ST AVE
GAINESVILLE, FL 32609 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: P
Name: LEVY, JULIE K DVM
Address: 2015 SW 16TH AVE
City-St-Zip: GAINESVILLE, FL 32610 UN

Title: V
Name: TUCKER, SYLVIA
Address: 2290 SE 193 CT
City-St-Zip: MORRISTON, FL 32668

Title: S
Name: SCOTT, KAREN
Address: 444 NW 26TH AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: T
Name: BARTON, AMY M
Address: 4118 NW 47TH PL
City-St-Zip: GAINESVILLE, FL 32606

Title: D
Name: BROWER, ANDREA C
Address: 16703 HWY 441 S.
City-St-Zip: MICANOPY, FL 32667

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: JULIE K. LEVY

PRES

04/30/2012

Electronic Signature of Signing Officer or Director

Date