SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

100704

**/**E\

1. Corporation	INE KENNELS AND CATTER	RY, INC.			
Principal Place of Business  SCOTT LEE IVEY 7705 W TENNESSEE ST TALLAHASSEE FL 32304		Mailing Address  * SCOTT LEE IVEY  7705 W TENNESSEE ST  TALLAHASSEE FL 32304		i iaanissa asan isiisa masii naana raini ahai ahais ahais ahain ahaii ahaii ahaii ahaii ahaii laafi	
				3. Date Incorporated or Qualified	3a. Date of Last Report
				07/16/1987	07/13/1995
<u>'</u>	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	4	26		59-2823652	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zιρ	Country	8. This corporation has liability for i	
24	25	29	30	Florida Statutes	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
IVE)	y, scott lee		81 Name		
770	5 W TENINESSEE ST		B2 Street Add	fress (P.O. Box Number is Not Acceptab	le)
TAL	LAHASSEE FL 32304		83		
	/		84 City		FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607 0502	and 607 1508. Florida Statute	es, the above named core	poration submits this statement for the pu	roose of changing its registered
office or re	gistered agent or both in the state of	f Florida Such change was a	uthorized by the corporal	poration submits this statement for the pulion's board of directors. I hereby accept	the appointment as registered
		(01901, 3801) 800 (303, FIO	nua statutes		7-25-96
SIGNATURE	Signal inelitypica or public submic at my steeled agent	and the if applicable (NOT	E. Blog stered Agent's gnature requ	ilired when remainting)	DAIL
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TIFLE	P	DELETE	1 1 1171.6		Change Addition
NAME	IVEY, SCOTT LEE	,	1.2 NAME		
STREET ADDRESS	7705 W. TENNESEE ST.		1.3 STREET ADDRESS		
CITY-ST-Z:P	TALLAHASSEE FL	TT DO ETC	14 C!TY - ST - ZIP	·····	
TITLE	V	DECETE	2 1 TITLE		Change Addition
NAME STREET ADDRESS	HOLMEN-MOHR, KRISTINA 3987 TIMBER RUN		2.2 NAME		
	HAVANA FL 32333		2.3 STREET ADDRESS		
DITY-ST-ZIP TITLE	TIAVANA FE 32333	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME		<u></u>	3.2 NAME		
STREET ADORESS			3 3 STREET ADDRESS		
CITY-S1-ZIP			34 CHY-ST-ZIP		
TITLE		DELETE	4 1 TITLE		Change Ado tion
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY - ST - ZIP			4 4 CITY - ST - ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	54 OTY - ST-ZIP		
TITLE		DELETE	& 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	_		6.3 STREET ADDRESS		
14. I do hereb	y certify that the information supply d	vita tais filiag is voluntarily fili	640IY-SE-ZIP	alify for the exemption stated in Section 1	19 07(3)(k). Florida Statutos T
further ceri made und	tify that the information indicator on the country of the country	riis annual 1900 t or suppleme	intal annual report is true erver or trustee empowers	and accurate and that my signature shall did to execute this report as required by C	I have the same legal effect as if

SIGNATURE: \_\_\_

TO TYPED OR PRINTED NAME OF SENING OFFICER OR DIRECTOR