## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002804

Entity Name: ADOPT A CAT FOUNDATION, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1125 OLD DIXIE HWY #8 LAKE PARK, FL 33403

Current Mailing Address: New Mailing Address:

12189 US HWY ONE 804 US HWY 1 SUITE 49, PMB 91 SUITE 1

NORTH PALM BEACH, FL 33408 LAKE PARK, FL 33403

FEI Number: 65-1002665 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

REEDER, MARGARET B CRYSTAL TREE OFFICE CENTRE SUITE 415 1201 US HIGHWAY 1 NORTH PALM BEACH, FL 33408 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

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition HANLEY, INGA HANLEY, INGA Name: Name: 1125 OLD DIXIE HWY # 8 Address: 1867 WINDSOR DRIVE Address: City-St-Zip: LAKE PARK, FL 33403 City-St-Zip: NORTH PALM BEACH, FL 33408 Title: Title: (X) Change ( ) Addition () Delete VETTER, TINA Name: VETTER, TINA Name: Address: 1201 US HIGHWAY 1, SUITE 415 Address: 2560 125TH STREET NORTH City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: PALM BEACH GARDENS, FL 33410 Title: () Delete Title: SEC ( ) Change (X) Addition Name: GREENE, MARYANN Name: Address: Address: 4382 HAWTHORN AVE City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410 Title: () Delete Title: В ( ) Change (X) Addition INGLIS, MARY Name: Name: 320 RIVERSIDE DRIVE Address: Address: City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410 Title: () Delete Title: ( ) Change (X) Addition CAROL, WALDENBURG Name: Name: 508 EAGLETON COVE TRACE Address: Address: City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 334140 Title: () Delete Title: ( ) Change (X) Addition CARYL. CONGLETON Name: Name: Address: Address: 404 SEA OATS DRIVE, APT F JUNO BEACH, FL 33408 City-St-Zip: 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: INGA HANLEY P 04/29/2008