

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000830

FILED  
Jan 09, 2012  
Secretary of State

Entity Name: FRIENDS OF SURFSIDE CATS, INC.

**Current Principal Place of Business:**

9180 BYRON AVENUE  
SURFISDE, FL 33154

**New Principal Place of Business:**

6222 SW 100 TERRACE  
PINECREST, FL 33156

**Current Mailing Address:**

9180 BYRON AVENUE  
SURFISDE, FL 33154

**New Mailing Address:**

6222 SW 100 TERRACE  
PINECREST, FL 33156

FEI Number: 65-1075009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEINFELD, LAREINE N  
9180 BYRON AVENUE  
SURSIDE, FL 33154 US

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

STEINFELD, LAREINE N  
6222 SW 100 TERRACE  
PINECREST, FL 33156 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:

01/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: LAREINE, STEINFELD  
Address: 6222 SW 100 TERRACE  
City-St-Zip: PINECREST, FL 33156

Title: DV  
Name: CAMELO, SUELY  
Address: 1165 98TH STREET, APT. 402  
City-St-Zip: SURFSIDE, FL 33154

Title: DT  
Name: STEINFELD, DAVID  
Address: 6222 SW 100 TERRACE  
City-St-Zip: PINECREST, FL 33156

Title: DS  
Name: LATONA, ROBERT  
Address: 325 SURFSIDE BLVD.  
City-St-Zip: SURFSIDE, FL 33154

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: LAREINE STEINFELD

DP

01/09/2012

Electronic Signature of Signing Officer or Director

Date