

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 21, 2002 8:00 am
Secretary of State

05-21-2002 91133 008 ****61.25

DOCUMENT # NO1000003365

1. Entity Name

PURRFECT LOVE CAT AND KITTEN RESCUE, INC.

Principal Place of Business

Mailing Address

6999-02 MERRILL ROAD #323
JACKSONVILLE FL 32277-2690

3624 MILLCREST DR
JACKSONVILLE FL 32277

2. Principal Place of Business

2945 Sydney Road

3. Mailing Address

6999-02 Merrill Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#1

#323

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

FL 32205 USA

Zip

32277

Country

USA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED
1000 W AVE STE 1114
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name: Deborah K Rambo

Street Address (P.O. Box Number is Not Acceptable)

2945 Sydney Rd

#1

City Jacksonville

FL

Zip Code 32205

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.

SIGNATURE: Deborah K Rambo, President and Director

4-29-02

4-29-06

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PD Debbie Rambo
STREET ADDRESS	6999-02 Merrill Road #323
CITY-ST-ZIP	Jacksonville, FL 32277
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hilee Brosius, VP/D
STREET ADDRESS	7041 Arques Drive
CITY-ST-ZIP	Jacksonville, FL 32205
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tabitha Barbree, VP/D
STREET ADDRESS	6999-02 Merrill Road #323
CITY-ST-ZIP	Jacksonville, FL 32277
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Unanika Schwabe ST
STREET ADDRESS	6999-02 Merrill Rd #323
CITY-ST-ZIP	Jacksonville, FL 32277
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Deborah K Rambo, Deborah K Rambo 4-29-02 904-389-8677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)