

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003365

FILED
Apr 26, 2009
Secretary of State

Entity Name: PURRFECT LOVE CAT AND KITTEN RESCUE, INC.

Current Principal Place of Business:

4752 GODWIN AVE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4752 GODWIN AVENUE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 59-3718803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMBO, DEBORAH
4752 GODWIN AVE
JACKSONVILLE, FL 32210 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: PDMD () Delete
Name: RAMBO, DEBBIE
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DS () Delete
Name: HUMPHREYS, BROOKE
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DPD () Delete
Name: HUMPHREYS, JOE
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DT () Delete
Name: MATTHEWS, NICOLE
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: KOPP, PAM
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DPD (X) Change () Addition
Name: DRIVER, CINDY
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DT (X) Change () Addition
Name: DAVIS, KELLY
Address: 4752 GODWIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

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: DEBBIE RAMBO

PDMD

04/26/2009

Electronic Signature of Signing Officer or Director

Date