2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N02000003039

Entity Name: FLORIDA'S FORGOTTEN FELINES, INC.

Current Principal Place of Business:

6746 OSBORNE DR.
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

6746 OSBORNE DR.
LANTANA, FL 33462

New Mailing Address:

FEI Number: 03-0469789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARMICHAEL, SUSAN
6746 OSBORNE DR.
LANTANA, FL 33462 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: D ( ) Delete
Name: CARMICHAEL, SUSAN
Address: 6746 OSBORNE DR.
City-St-Zip: LANTANA, FL 33462

Title: D ( ) Delete
Name: STROUT, JIM
Address: 5888 JUDD FALLS RD.
City-St-Zip: LAKE WORTH, FL 33463

Title: D ( ) Delete
Name: BARNES, MARY A
Address: 129 BUTTONWOOD LANE
City-St-Zip: BOYNTON BCH, FL 33436

Title: D ( ) Delete
Name: OEST, ULLA
Address: 2801 NE 7TH ST.
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: STROUT, JIM
Address: 6746 OSBORNE DR
City-St-Zip: LANTANA, FL 33462

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

Title: D (X) Change ( ) Addition
Name: HOFFMAN, LINDA
Address: 4629 MARINERS COVE DRIVE
City-St-Zip: WELLINGTON, FL 33449

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: SUSAN CARMICHAEL D 04/27/2008

Electronic Signature of Signing Officer or Director — Date