2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N02000007950

Entity Name: BLESS THEIR HEARTS KITTY HAVEN, INC.

Current Principal Place of Business:

323 SUZANNE DR
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

323 SUZANNE DR
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 13-4216234 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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:	MR	( ) Delete
Name:	LEWIS, JAMES N TRESURE	
Address:	11524 PRINCESSA LANE	
City-St-Zip:	JACKSONVILLE, FL 32218 US	
Title:	MR	( ) Delete
Name:	LEWIS, JAMES N SECRETA	
Address:	11524 PRINCESSA LANE	
City-St-Zip:	JACKSONVILLE, FL 32218 US	
Title:	MRS	( ) Delete
Name:	BLACKWELDER, VENITA A PRES	
Address:	323 SUZANNE DRIVE	
City-St-Zip:	JACKSONVILLE, FL 32218 US	
Title:	MR	( ) Delete
Name:	BLACKWELDER, STANLEY D VP	
Address:	323 SUZANNE DRIVE	
City-St-Zip:	JACKSONVILLE, FL 32218 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: VENITA A BLACKWELDER PRES 02/04/2009

Electronic Signature of Signing Officer or Director — Date