

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000005939

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Entity Name:** SECOND CHANCE CAT RESCUE, INC.

**Current Principal Place of Business:**

40 RAMBLEWOOD DR.  
PALM COAST, FL 32164

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 354355  
PALM COAST, FL 32135

**New Mailing Address:**

**FEI Number:** 54-2131972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MOLINA, MARI  
40 RAMBLEWOOD DRIVE  
PALM COAST, FL 32164 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: MS  
Name: MOLINA, MARI PRES  
Address: 40 RAMBLEWOOD DRIVE  
City-St-Zip: PALM COAST, FL 32164

Title: MRS  
Name: HAWKINS, MURIEL VICE PR  
Address: 13 CREEK COURT  
City-St-Zip: PALM COAST, FL 32137

Title: MRS  
Name: WILD, ISABEL TRES  
Address: 62 FAIRBANK LN  
City-St-Zip: PALM COAST, FL 32137

Title: MRS  
Name: BEARSS, BECKY SECTY  
Address: P O BOX 350405  
City-St-Zip: PALM COAST, FL 32135

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: MARI MOLINA

PRE

03/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date