

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N04000009579

**FILED**  
**Dec 01, 2011**  
**Secretary of State**

**Entity Name:** ANGELS HAVE WHISKERS, INC.

**Current Principal Place of Business:**

1142 BUCKLES RD  
PIERSON, FL 32180

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 274  
BARBERVILLE, FL 32105

**New Mailing Address:**

**FEI Number:** 42-1649030

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STOCKHOLM, CHERIE  
1142 BUCKLES RD  
PIERSON, FL 32180 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:** CHERIE STOCKHOLM

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** STOCKHOLM, CHERIE  
**Address:** 1142 BUCKLES RD  
**City-St-Zip:** PIERSON, FL 32180

**Title:** D  
**Name:** RUBIN, MARK  
**Address:** 3693 WALDEN POND DR  
**City-St-Zip:** SARASOTA, FL 34240

**Title:** D  
**Name:** WASKIEWICZ-PELELLA, CINDY  
**Address:** 6 RIVER ROCK TRL  
**City-St-Zip:** ORMOND BEACH, FL 32174

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:** CHERIE STOCKHOLM

D

12/01/2011

Electronic Signature of Signing Officer or Director

Date