

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001377

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** FOR THE LOVE OF CATS, INC.

**Current Principal Place of Business:**

511 ANTILLES CT  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1777  
MARCO ISLAND, FL 34146

**New Mailing Address:**

**FEI Number:** 20-4188963

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RICH, JANET H  
511 ANTILLES CT  
MARCO ISLAND, FL 34145 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  
Name: RICH, JAMES F  
Address: 511 ANTILLES CT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D  
Name: RICH, JANET H  
Address: 511 ANTILLES CT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D  
Name: HONIG, LISA  
Address: 481 RIO CT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D  
Name: TOBIE, RUTH  
Address: 1273 BLUEBIRD AVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D  
Name: LEVINE, LINDA  
Address: 331 CAPISTRANO CT.  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D  
Name: CONFER, BOBBIE  
Address: 711 ROCKPORT CT  
City-St-Zip: MARCO ISLAND, FL 34145

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: JANET H RICH

PRES

03/21/2011

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

\_\_\_\_\_  
Date