

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007520

FILED
Aug 24, 2009
Secretary of State

Entity Name: FELINE URBAN RESCUE / REHAB. INC. AND EMERGENCY ANIMAL RESCUE SERVICE INC.

Current Principal Place of Business:

402 CORAL LANE
COCOA, FL 32927

New Principal Place of Business:

45 BRANDY LANE
MERRITT ISLAND, FL 32952

Current Mailing Address:

402 CORAL LANE
COCOA, FL 32927

New Mailing Address:

45 BRANDY LANE
MERRITT ISLAND, FL 32952

FEI Number: 11-3840525 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOORE, BRUCE G
402 CORAL LANE
COCOA, FL 32927 US

Name and Address of New Registered Agent:

MOORE, BRUCE G
45 BRANDY LANE
MERRITT ISLAND, FL 32952 US

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

08/24/2009

Date

OFFICERS AND DIRECTORS:

Title: DPVS () Delete
Name: MOORE, BRUCE G
Address: 402 CORAL LANE
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change () Addition
Name: MOORE, BRUCE G
Address: 45 BRANDY LANE
City-St-Zip: MERRITT ISLAND, FL 32952

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: BRUCE G MOORE

CEO

08/24/2009

Electronic Signature of Signing Officer or Director

Date