2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N08000000337

Entity Name: KATZ 4 KEEPS, INC.

Current Principal Place of Business:

3101 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

3101 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 26-1709573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TEDRICK, TRACIE L
3101 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH, FL 32082 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 ( ) Delete
Name: BOISHIE, MARY E
Address: 123 LAUREL LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: CONWAY, MARY LEE
Address: 7460 FOUNDERS WAY
City-St-Zip: VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: TEDRICK, TRACIE L
Address: 132 OLD PONTE VEDRA DR.
City-St-Zip: VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BOUSHIE, MARY E
Address: 124 LAUREL LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Change ( ) Addition
Name: CONWAY, MARY LEE
Address: 7460 FOUNDERS WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Change ( ) Addition
Name: TEDRICK, TRACIE L
Address: 132 OLD PONTE VEDRA DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: TRACIE L TEDRICK TREA 01/19/2009

Electronic Signature of Signing Officer or Director — Date