

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004438

FILED  
Jan 06, 2010  
Secretary of State

Entity Name: ISLAND CATS OF PB, INC.

## Current Principal Place of Business:

354 CHILEAN AVE., UNIT 5C  
PALM BEACH, FL 33480

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 332  
PALM BEACH, FL 33480

## New Mailing Address:

FEI Number: 26-2554471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEHART, MARCY I ESQ  
711 TALLADEGA ST  
WEST PALM BEACH, FL 33405 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: BREYER, HENRY 3RD  
Address: 354 CHILEAN AVE., UNIT 5C  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: MASON, ALLEN  
Address: 354 CHILEAN AVE., UNIT 5C  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: LEAVITT, DAVID  
Address: 354 CHILEAN AVE., UNIT 5C  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: ANLYAN, WILLIAM  
Address: 354 CHILEAN AVE., UNIT 5C  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: MASON, ZELDA  
Address: 354 CHILEAN AVE., UNIT 5C  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: ANLYAN, ALEXANDRA  
Address: 354 CHILEAN AVE., UNIT 5C  
City-St-Zip: PALM BEACH, FL 33480

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: ALLEN MASON

D

01/06/2010

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

\_\_\_\_\_  
Date