

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004438

FILED
Mar 06, 2012
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:

LAHART, MARCY I ESQ
4804 SW 45TH ST.
GAINESVILLE, FL 32608 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: MARCY I. LAHART

03/06/2012

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: DAVID LEAVITT

MR.

03/06/2012

Electronic Signature of Signing Officer or Director

Date