

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005881

FILED  
May 01, 2009  
Secretary of State

Entity Name: BEACH CAT RESCUE, INC.

## Current Principal Place of Business:

801 LAKE POWELL DRIVE  
PANAMA CITY BEACH, FL 32413

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 9613  
PANAMA CITY BEACH, FL 32417

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
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:

## Name and Address of New Registered Agent:

SHOEMAKER, CINDY  
801 LAKE POWELL DRIVE  
PANAMA CITY BEACH, FL 32413 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

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SHOEMAKER, CINDY  
Address: 801 LAKE POWELL DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VP ( ) Delete  
Name: SHOEMAKER, ROBERT  
Address: 801 LAKE POWELL DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: S ( ) Delete  
Name: SCHOTT, GERRY  
Address: 228 OLEANDER DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: T ( ) Delete  
Name: BURDICK, SHERRY  
Address: 3293 COUNTY ROUTE 176  
City-St-Zip: OSWEGO, NY 13126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CINDY SHOEMAKER

PRES

05/01/2009

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

\_\_\_\_\_  
Date