2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2009
Secretary of State

DOCUMENT# N09000004296

Entity Name: CAT FIGHT, INC.

Current Principal Place of Business:

2627 E. 16TH STREET
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

2627 E. 16TH STREET
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 30-0468404 **FEI Number Applied For ( )** **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:

HORNE, JOSEPH L
2627 E 16TH ST
PANAMA CITY, FL 32405 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: PD ( ) Delete
Name: HORNE, WANDA
Address: 2627 E 16TH ST
City-St-Zip: PANAMA CITY, FL 32405

Title: VPD ( ) Delete
Name: KRUTCHEK, MATT
Address: 1541 CHANDLEE AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: SD ( ) Delete
Name: WILEMON, ANNA
Address: 1012 VENETIAN WAY
City-St-Zip: PANAMA CITY, FL 32405

Title: TD ( ) Delete
Name: HORNE, DANIEL
Address: 2627 E 16TH ST
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete
Name: ODOM, MAGGIE
Address: 5108 KENDRICKS ST
City-St-Zip: PARKER, FL 32404

Title: D ( ) Delete
Name: HORNE, JOSEPH
Address: 5108 KENDRICKS ST
City-St-Zip: PARKER, FL 32404

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:

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: JOSEPH HORNE D 08/26/2009
Electronic Signature of Signing Officer or Director — Date