

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 12, 2009  
Secretary of State

DOCUMENT# N29990

Entity Name: DOGS AND CATS FOREVER, INC.

**Current Principal Place of Business:**

9550 CARLTON RD.  
PORT ST LUCIE, FL 34987

**New Principal Place of Business:**

**Current Mailing Address:**

2012 LAUREL OAK LANE  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 65-0118134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

APICELLA, JOHANNA  
2012 LAUREL OAK LANE  
PALM CITY, FL 34990 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: S ( ) Delete  
Name: NICHOLSON, ANDREA G  
Address: 1195 SW LIVE OAK COVE  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: TD ( ) Delete  
Name: APICELLA, JOHANNA  
Address: 2012 LAUREL OAK LANE  
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Delete  
Name: HUBBARD, EDWARD  
Address: 325 NE 7TH STREET  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete  
Name: MCCALLUM, GAIL  
Address: 556 HALPATIOKEE ST  
City-St-Zip: STUART, FL 34994

Title: D ( ) Delete  
Name: SMALLACOMBE, ROBERT  
Address: 8246 SE SANCTUARY DR  
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete  
Name: MOORE, SUSAN  
Address: 1826 BUTTONBUSH CIR  
City-St-Zip: PALM CITY, FL 34990

**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: ANDREA G. NICHOLSON

S

03/12/2009

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

\_\_\_\_\_  
Date