

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE
		Katherine Harris
		Secretary of State DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 FEB 12 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N47648

1. Corporation Name

The Rowe's Orphanage For Cats and Kittens, Inc.

Principal Place of Business

Mailing Address

2191 Bush Street
Pensacola, Florida
32534

2288A Sparrow Lane
Pensacola, Florida
32534

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	3-15-95 3-5-92
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-3042656
City & State	City & State	Applied For
23	28	Not Applicable
Zip	Zip	5. Certificate of Status Desired
24	29	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Country	Country	6. Election Campaign Financing
25	30	Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

Lela Rowe
2288A Sparrow Lane
Pensacola, Florida
32534

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D President / Lela Rowe	11 TITLE	
NAME	2288A Sparrow Lane	12 NAME	
STREET ADDRESS	Pensacola, Florida 32534	13 STREET ADDRESS	500002778315-3
CITY-ST-ZIP		14 CITY-ST-ZIP	-02/17/99-01067-009
TITLE	S/O Secretary / Frankie Van Horn	21 TITLE	
NAME	901 Williams Ditch Road	22 NAME	
STREET ADDRESS	Cantonment, Florida	23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	T/O Treasurer / Sandy Skilman	31 TITLE	
NAME	2204 Tate Rd	32 NAME	
STREET ADDRESS	Cantonment, Florida	33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lela Rowe / Director / President
Lela Rowe

2-10-99 (850) 478-8507

Date

Daytime Phone #

CR2E037 (11/98)