

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # N47648	
1. Entity Name THE ROWE'S ORPHANAGE FOR CATS AND KITTENS, INC.	

Principal Place of Business 2191 BUSH STREET PENSACOLA FL 32534 US	Mailing Address 2288A SPARROW LANE PENSACOLA FL 32534 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)	
4. FEI Number 59-3042656	Applied For ☐ No: Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ROWE, LELA 2288-A SPARROW LANE PENSACOLA FL 32534	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature is used with no change) DATE _____

FILE NOW: FEE IS \$61.25 Due By: May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	NAME ROWE, LELA STREET ADDRESS 2288-A SPARROW LANE CITY-ST-ZIP PENSACOLA FL 32534	☐ Delete	☐ Change ☐ Addition
TITLE SD	NAME VAN HORN, FRANKLIN STREET ADDRESS 901 WILLIAMS DITCH ROAD CITY-ST-ZIP CANTONMENT FL	☐ Delete	☐ Change ☐ Addition
TITLE TD	NAME ROWE, FRANCIS STREET ADDRESS 2191 BUSH STREET CITY-ST-ZIP PENSACOLA FL 32534	☐ Delete	☐ Change ☐ Addition
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lela Rowe Lela Rowe 1/22/08 (850) 478-8507