

FILE NOW: FILING FEE IS \$61.25 5471-1

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000003507 (0)

1. Corporation Name

CAT WOMAN'S SHELTER, INCORPORATED

FILED

36 JUN 27 AM 7:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



900001878039

06/27/96-01046-014

*****81.25 *****81.25

Principal Place of Business

Mailing Address

% ABEL. BAND
240 S PINEAPPLE AVE
SARASOTA FL 34236

% ABEL. BAND
240 S PINEAPPLE AVE
SARASOTA FL 34236

3. Date Incorporated or Qualified
07/15/1994

5a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 2120 Princeton St

26 2120 Princeton St

4. FEI Number

65-0506532

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

24 Zip

Country

29 Zip

Country

34237

USA

34237

USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUSSELL, JEFFREY S
% ABEL, BAND
240 S PINEAPPLE AVE
SARASOTA FL 34236

81 Name

BRAND, Cathy

82 Street Address (P.O. Box Number is Not Acceptable)

2120 Princeton St

83

84 City

Sarasota

FL

85 Zip Code
34237

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

Cathy Brand for Cat Woman's Shelter Inc.
Signature, typed name, and address of registered agent and director, if applicable

(NOTE: Registered Agent signature required when re-registering)

6/20/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE DPST
NAME BRAND, CATHY
STREET ADDRESS % ABEL, BAND 240 S PINEAPPLE AVE
CITY-ST-ZIP SARASOTA FL 34236

1.1 TITLE D/P/T
1.2 NAME BRAND, Cathy
1.3 STREET ADDRESS 2120 Princeton St
1.4 CITY-ST-ZIP Sarasota FL 34237

TITLE DV
NAME RUSSELL, JEFFREY S
STREET ADDRESS % ABEL, BAND 240 S PINEAPPLE AVE
CITY-ST-ZIP SARASOTA FL 34236

2.1 TITLE V
2.2 NAME KUNICK, James
2.3 STREET ADDRESS 27 S. Orange Ave, Suite 1
2.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE D
NAME MILHORN, GATHAEE K
STREET ADDRESS 240 S PINEAPPLE AVE
CITY-ST-ZIP SARASOTA FL 34236

3.1 TITLE D
3.2 NAME RUSSELL, Jean
3.3 STREET ADDRESS 1800 2nd Street, Suite 1
3.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE D/S
4.2 NAME GORHAM, Debra
4.3 STREET ADDRESS 230 Avenida Madera
4.4 CITY-ST-ZIP Sarasota, FL 34242

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Cathy Brand for Cat Woman's Shelter Inc.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cathy Brand, Director 6/20/96 941/954-0624

Date

Daytime Phone #

CR2E037 (12/95)