

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 DEC 13 AM 8:01

DOCUMENT # N94000003507

1. Corporation Name

CAT WOMAN'S SHELTER, INCORPORATED

Principal Place of Business

2120 PRINCETON ST  
SARASOTA FL 34237  
US

Mailing Address

PO BOX 15604  
SARASOTA FL 34277  
US



REINSTATEMENT

02

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/15/1994	
City & State		City & State		5. FEI Number	
Zip		Zip		65-0506532	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>				S8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPT	BRAND, CATHY	2120 PRINCETON STREET	SARASOTA FL 34237
DVP	LENHARDT, ANESTA	1748 INDEPENDENCE BLVD	SARASOTA FL 34219
<del>DPS</del>	<del>DECELLE, MELISSA</del>	<del>3842 MIDDLESEX PL</del>	<del>SARASOTA FL 34241</del>
DS	Anderson, Dave	2120 Princeton St.	Sarasota, FL 34237
<del>D</del>	<del>BERSHON, BURT</del>	<del>1000 2ND ST SUITE 601</del>	<del>SARASOTA FL 34236</del>
400009509374 12/13/02--01092--003 **8.75			
400009509374 12/13/02--01092--002 **236.25			

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
BRAND, CATHY 2120 PRINCETON STREET SARASOTA FL 34237		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent Cathy Brand for Cat Woman's Shelter, Inc. Date 10/31/02

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature: Cathy Brand for Cat Woman's Shelter, Inc. Date 10/31/02 Daytime Phone # (941) 953-2280

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR