2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003468

FILED Apr 28, 2006 Secretary of State

Entity Name: BIG CAT HABITAT/GULF COAST SANCTUARY, INC.

Current Principal Place of Business: New Principal Place of Business: 7100 PALMER ROAD SARASOTA, FL 342404219 **Current Mailing Address: New Mailing Address:** 3115 44TH ST. SARASOTA, FL 34234 FEI Number: 65-0659177 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROSS, KAY P 3115 44TH ST. SARASOTA, FL 342344216 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ROSS, KAY P Name: Name: 3115 44TH ST. Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: Title: MEM () Delete Title: (X) Change () Addition REPASY, LINDA Name: BROWN, CHRISTOPHER Name: Address: 24 TUCKER AVENUE Address: 1121 SIRIUS TRAIL City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232 Title: MEM () Delete Title: DIR (X) Change () Addition ROSS, DERRIK V ROSS, DERRICK V Name: Name: Address: 3115 44TH ST Address: 3115 44TH ST City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34234 () Delete Title: MEM Title: DIR (X) Change () Addition Name: HINES, RON Name: HENTE, GERRI Address: 170 DRAPER DRIVE Address: 1819 MAIN STREET STE 502 City-St-Zip: BROWNSVILLE, TX 78251 City-St-Zip: SARASOTA, FL 34236 MEM Title: () Delete Title: (X) Change () Addition ZOPE, PAMELA MOWERY, CLAYTON Name: Name: 5317 FRUITVILLE RD., #175 **3115 44TH STREET** Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34234 Title: () Delete Title: () Change (X) Addition ROBERSON, LINDA L Name: Name: Address: Address: PO BOX 21355 BRADENTON, FL 34203 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KAY P ROSS PRES 04/28/2006