

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005073

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: CAT RESCUE, INC.

**Current Principal Place of Business:**

6521 EAST TROPICAL WAY  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

6521 EAST TROPICAL WAY  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 65-0712309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NOREM, SHERRY L  
6521 EAST TROPICAL WAY  
PLANTATION, FL 33317 US

**Name and Address of New Registered Agent:**

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:**

Title: DP ( ) Delete  
Name: VIVES, ALICIA  
Address: 12180 SW 3 STREET  
City-St-Zip: PLANTATION, FL 33317

Title: DST ( ) Delete  
Name: NOREM, SHERRY  
Address: 6521 E. TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317

Title: DVP ( ) Delete  
Name: BILOTTI, CAROL  
Address: 8709 SW 52 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHERRY L. NOREM

DST

01/04/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date