2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# N96000006059

Entity Name: CARE FELINE TNR, INC.

Current Principal Place of Business:

1421 SILREETHORN DR.
ORLANDO, FL 32825 US

New Principal Place of Business:

1421 SILVERTHORN DR.
ORLANDO, FL 32825 US

Current Mailing Address:

1421 SILREETHORN DR.
ORLANDO, FL 32825 US

New Mailing Address:

1421 SILVERTHORN DR.
ORLANDO, FL 32825 US

FEI Number: 59-3419640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FREEMAN, LISA
1421 SILVERTHORN DR.
ORLANDO, FL 32825 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: P ( ) Delete
Name: FREEMAN, LISA
Address: 1421 SILVERTHORN DR.
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete
Name: ROGERS, SANDRA
Address: 1823 HITES CT
City-St-Zip: ORLANDO, FL 32818

Title: VP ( ) Delete
Name: DELL, JEAN
Address: 88 N WEST CHRISTMAS RD
City-St-Zip: CHRISTMAS, FL 32709

Title: ST ( ) Delete
Name: SHAW, SUZAN
Address: 2040 ST GEORGE AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete
Name: CARLENE, NALL
Address: 237 LINDA VISTA ST.
City-St-Zip: DEBARY, FL 32713

Title: D ( ) Delete
Name: STEELE, WAREN
Address: 3641 SICKLE ST.
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CRANIS, MELISSA
Address: 6418 HAUGHTON LN
City-St-Zip: ORLANDO, FL 32835

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

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

Title: T (X) Change ( ) Addition
Name: FREEMAN, LISA
Address: 1421 SILVERTHORN DR
City-St-Zip: ORLANDO, FL 32825

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

Title: S (X) Change ( ) Addition
Name: STEELE, WAREN
Address: 3641 SICKLE ST.
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify 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: LISA FREEMAN T 02/24/2009

Electronic Signature of Signing Officer or Director — Date