2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008
Secretary of State

DOCUMENT# N97000000540

Entity Name: FIX & FEED FELINE FERAL, INC.

Current Principal Place of Business:

12003 LAKE RIDGE ROAD
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

12003 LAKE RIDGE ROAD
TAMPA, FL 33618

New Mailing Address:

FEI Number: 59-3425286 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DICKOVER, BILLIE
12003 LAKE RIDGE RD
TAMPA, FL 33618 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: PD ( ) Delete
Name: DICKOVER, BILLIE K
Address: 12003 LAKE RIDGE ROAD
City-St-Zip: TAMPA, FL 33618

Title: TD ( ) Delete
Name: REED, PAMELA
Address: 554 CYPRESS WAY E
City-St-Zip: NAPLES, FL 34110

Title: VSD ( ) Delete
Name: DEJONG, ANNEMARIE
Address: 214 S. HABANA AVE.
City-St-Zip: TAMPA, FL 33609

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 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: BILLIE DICKOVER PD 01/22/2008

Electronic Signature of Signing Officer or Director Date