

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 19, 2008 8:00 am
Secretary of State

08-19-2008 90003 025 ****61.25

DOCUMENT # N98000003981

1. Entity Name

ALLEY CAT RESCUE, INC.



Principal Place of Business
5830 HAGERMAN ROAD
SARASOTA FL 34232

Mailing Address
5830 HAGERMAN ROAD
SARASOTA FL 34232

40113826



running on a tight deadline
I'm sorry Ruth Wessels
2nd MOORE CR2E037 (4/08)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0810735

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WESSELS, RUTH
5830 HAGERMAN ROAD
SARASOTA FL 34232

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 3, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME WESSELS, LAUREL
STREET ADDRESS 5830 HAGERMAN ROAD
CITY-ST-ZIP SARASOTA FL 34232

TITLE P ☐ Delete
NAME WESSELS, RUTH
STREET ADDRESS 5830 HAGERMAN ROAD
CITY-ST-ZIP SARASOTA FL 34232

TITLE VP ☐ Delete
NAME GARRISON, AUDREY
STREET ADDRESS 1406 63RD STREET WEST
CITY-ST-ZIP BRADENTON FL 34209

TITLE D ☐ Delete
NAME BROWER, SUSAN
STREET ADDRESS 3722 61 ST W
CITY-ST-ZIP BRADENTON FL 34209

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ruth Wessels

8-2-08

PH-371-1223