

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003981

FILED  
Feb 09, 2009  
Secretary of State

Entity Name: ALLEY CAT RESCUE, INC.

**Current Principal Place of Business:**

5830 HAGERMAN ROAD  
SARASOTA, FL 34232

**New Principal Place of Business:**

**Current Mailing Address:**

5830 HAGERMAN ROAD  
SARASOTA, FL 34232

**New Mailing Address:**

FEI Number: 65-0810735

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WESSELS, RUTH  
5830 HAGERMAN ROAD  
SARASOTA, FL 34232 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: D ( ) Delete  
Name: WESSELS, LAUREL  
Address: 5830 HAGERMAN ROAD  
City-St-Zip: SARASOTA, FL 34232

Title: P (X) Delete  
Name: WESSELS, RUTH  
Address: 5830 HAGERMAN ROAD  
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Delete  
Name: GARRISON, AUDREY  
Address: 1406 63RD STREET WEST  
City-St-Zip: BRADENTON, FL 34209

Title: D (X) Delete  
Name: BROWER, SUSAN  
Address: 3722 61 ST W  
City-St-Zip: BRADENTON, FL 34209

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

Title: P (X) Change ( ) Addition  
Name: RUTH, WESSELS  
Address: 5830 HAGERMAN RD.  
City-St-Zip: SARASOTA, FL 34232

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: RUTH WESSELS

P

02/09/2009

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

\_\_\_\_\_  
Date