## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000005200

Entity Name: SPACE COAST CAT CLUB, INC.

FILED Mar 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1063 PINELLAS BAY WAY 14642 MIRASOL MANOR COURT

TIERRA VERDE, FL 33715 TAMPA, FL 33626

**Current Mailing Address: New Mailing Address:** 

PO BOX 30396

PALM BEACH GARDENS, FL 33420

FEI Number: 59-3527490 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WATTS, JUDY L WATTS, JUDY L 1063 PIŃELLAS BAY WAY

14642 MIRASOL MANOR COURT TAMPA, FL 33626 TIERRA VERDE, FL 33715 US US

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: 03/20/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

URY. KERRY WATTS, JUDY L Name: Name: 7740 NEMEC DRIVE, SOUTH Address: 14642 MIRASOL MANOR COURT Address:

City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: TAMPA, FL 33626

Title: SD Title: SD (X) Change ( ) Addition ( ) Delete

Name: WATTS, JUDY L Name: DEEN, DALAINA Address: 1063 PINELLAS BAY WAY Address: 13565 TANGERINE BLVD. City-St-Zip: TIERRA VERDE, FL 33715 City-St-Zip: WEST PALM BEACH, FL 33412

Title: () Delete Title: () Change () Addition

CARTER, DARCELLE D Name: Name:

Address: PO BOX 30396 Address: City-St-Zip: PALM BEACH GARDENS, FL 33420 City-St-Zip:

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

Name: DEEN, DALAINA Name: DUCKETT, NANCY 13565 TANGERINE BLVD. Address: Address: 6480 S.E. 42ND COURT City-St-Zip: WEST PALM BEACH, FL 33412 City-St-Zip: OCALA, FL 34480

I hereby certify that the information supplied with this filing does not qualify for the 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: DARCELLE CARTER TD 03/20/2007