

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001142

Entity Name: CAT LOVERS INC.**Current Principal Place of Business:**3620 W STERLING CIRCLE
TAMPA, FL 33617**Current Mailing Address:**3620 W STERLING CIRCLE
TAMPA, FL 33629 US**FEI Number:** 06-1739609**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VOGT, CAROLYN
3620 W STERLING CIRCLE
TAMPA, FL 33629 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|-----------------------|
| Title | PRES |
| Name | VOGT, CAROLYN |
| Address | 3620 W STERLING COURT |
| City-State-Zip: | TAMPA FL 33629 |

| | |
|-----------------|---------------------------|
| Title | VP |
| Name | MCCHESNEY, SHARYN |
| Address | 2105 SOUTH MANHATTEN AVE. |
| City-State-Zip: | TAMPA FL 33629 |

| | |
|-----------------|----------------------------------|
| Title | SECRETARY |
| Name | HOLLENBECK, KAREN |
| Address | 5925 SHORE BLVD. SOUTH NU 205 |
| City-State-Zip: | GULFPORT FL 33707 |

| | |
|-----------------|-------------------------------|
| Title | DIRECTOR |
| Name | MCMINN, TERI |
| Address | 2105 SO. MANHATTEN AVE 104 |
| City-State-Zip: | TAMPA FL 33629 |

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|-----------------|-------------------------|
| Title | DIRECTOR |
| Name | WILLIAMSON, JUDY |
| Address | 4210 WEST ROLAND STREET |
| City-State-Zip: | TAMPA FL 33609 |

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN VOGT**PRESIDENT****04/05/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date