2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32769

Entity Name: ORCAT, INC.

FILED
May 08, 2020
Secretary of State
3865506137CC

Current Principal Place of Business:

97 SOUTH HARBOR DRIVE KEY LARGO. FL 33037

Current Mailing Address:

97 SOUTH HARBOR DRIVE KEY LARGO, FL 33037 US

FEI Number: 65-0125916 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOREN, CHEROF, DOODY & EZROL, PA 3099 E COMMERCIAL BLVD #200

FORT LAUDERDALE, FL 33308 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: KATHERINE JACKSON 05/08/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title T Title P

Name CONNOLLY, KATARZYNA Name BRYAN, LUISA

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LANE PMB 505

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR Title DIRECTOR

Name STORM, JOHN Name BLAYLOCK, LYNDA

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LANE PMB 505

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

TitleDIRECTORTitleDIRECTORNameCARLISLE, FRANNameLEE, MARY

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LANE PMB 505

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR Title SECRETARY

Name FLANAGAN, THOMAS Name WALLACE, SIMONA

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LN

PMB 505

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

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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: SIMONA WALLACE SECRETARY 05/08/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ROSS, ANN Name TERWILLIGER, FRAN

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LANE PMB 505

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR Title DIRECTOR

Name DESMOND, LISA Name GUTIERREZ-HASKETT, TERESA

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LANE PMB 505

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

Title VP Title DIRECTOR

Name TINDLE, GREGORY Name ADAMS, LINDA

Address 24 DOCKSIDE LANE PMB 505 Address 24 DOCKSIDE LANE

City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037