

2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N32769

Entity Name: ORCAT, INC.**Current Principal Place of Business:**97 SOUTH HARBOR DRIVE
KEY LARGO, FL 33037**Current Mailing Address:**24 DOCKSIDE LANE
PMB 505
KEY LARGO, FL 33037 US**FEI Number:** 65-0125916**Certificate of Status Desired:** Yes**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

11/11/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name BRYAN, LUISA
Address 24 DOCKSIDE LANE PMB 505
City-State-Zip: KEY LARGO FL 33037

Title VC
Name STAMPS, ANNIE
Address 97 SOUTH HARBOR DRIVE
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name PERETZ, ANNE MARIE
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name WOODSUM, ALEX
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name ZAUSMER, LAURA
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name WILLIAMS, MADELEINE
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name SMITH, ROSALYN
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name GRUNOW, LISA
Address 24 DOCKSIDE LANE
PMB 505
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: JANA PRATT**SECRETARY**

11/11/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ZEIGLER, BONNIE
Address 24 DOCKSIDE LANE
PMB 505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name DESMOND, LISA
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name BAXTER, PAT
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037

Title SECRETARY
Name PRATT, JANA
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name TERWILLIGER, FRAN
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name CARLISLE, FRAN
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037

Title PRESIDENT
Name ARTIME, ARIEL
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037

Title TREASURER
Name SKINNER, Yael
Address 24 DOCKSIDE LN., #505
City-State-Zip: KEY LARGO FL 33037