

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90183 012 ***150.00

DOCUMENT # 159903

1. Entity Name
ST. PETERSBURG KENNEL CLUB, INC.

Principal Place of Business

**10490 GANDY BLVD
 ST PETERSBURG FLA 33702**

Mailing Address

**P.O. BOX 22099
 ST. PETERSBURG FL 33742-2099
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0433065**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WEAVER, A.V. JR.
 10490 GANDY BLVD
 ST PETERSBURG FL 33702**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEAVER, VEY O. 10490 GANDY BLVD ST. PETERSBURG FL 33702	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIPER, HARRY M 1833 BRIGHTWATERS BLVD ST. PETERSBURG FL 33702	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST CUTTING, LEAH R 10490 GANDY BLVD. ST. PETERSBURG FL 33702	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WINNING, RICHARD 10490 GANDY BLVD ST. PETERSBURG FL 33702	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HLAS, STEPHEN P. 10490 GANDY BLVD ST PETERSBURG FL 33702	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINNING, MARY M 1261 BRIGHTWATERS BLVD ST. PETERSBURG FL 33702	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Weaver, A.V. Jr. 10490 Gandy Blvd St. Petersburg, FL 33702	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kerr, Ann Loughridge 2817 Hawthorne Road Tampa, FL 33611	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nohren, Frances 7947 9th Avenue, South St. Petersburg, FL 33707	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Leah Cutting
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEAH CUTTING

02/22/02 727-012-3236

Date

Daytime Phone #

CR2E034 (9/01)