2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 159903

Entity Name: ST. PETERSBURG KENNEL CLUB, INC.

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10490 GANDY BLVD ST PETERSBURG, FL 33702 **Current Mailing Address: New Mailing Address:** P.O. BOX 22099 ST. PETERSBURG, FL 337422099 US FEI Number: 59-0433065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEPHEN P. HLAS 10490 GANDY BLVD ST PETERSBURG, FL 33702 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WEAVER, VEY O. Name: Name: 10490 GANDY BLVD Address: Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: Title: () Delete () Change () Addition Name: PIPER, HARRY M. Name: 100 BEACH DRIVE NE #602 Address: Address: ST. PETERSBURG, FL 33701 City-St-Zip: City-St-Zip: () Delete Title: Title: AST () Change () Addition CUTTING, LEAH R Name: Name: 10490 GANDY BLVD. Address: Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: VD () Delete Title: () Change () Addition WINNING, RICHARD, Name: Name: Address: 10490 GANDY BLVD Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: Title: () Delete () Change () Addition HLAS, STEPHEN P., Name: Name: 10490 GANDY BLVD Address: Address: City-St-Zip: ST PETERSBURG, FL 33702 City-St-Zip: Title: () Delete Title: () Change () Addition WINNING, MARY M, Name: Name: 1261 BRIGHTWATERS BLVD Address: Address: City-St-Zip: City-St-Zip: ST. PETERSBURG, FL 33702

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEAH CUTTING AST 01/05/2006