

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90197 019 ***150.00

MARKER
AV

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**

☐ CHECK HERE IF MAKING CHANGES



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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE	D	☐ Change ☒ Addition
NAME	Kerr, Ann Loughridge	
STREET ADDRESS	8817 Hawthorne Rd	
CITY-ST-ZIP	Tampa, FL 33611	
TITLE	D	☐ Change ☒ Addition
NAME	Nohren, Frances Weaver	
STREET ADDRESS	7947 9th Ave So	
CITY-ST-ZIP	St. Petersburg, FL 33707	
TITLE	PO	☐ Change ☒ Addition
NAME	Weaver, Arthur. V.	
STREET ADDRESS	738 Pinellas Bayway	
CITY-ST-ZIP	Tierra Verde, FL 33715	
TITLE	VD	☒ Change ☐ Addition
NAME	Winning, Richard B.	
STREET ADDRESS	10490 Gandy Blvd.	
CITY-ST-ZIP	St. Petersburg, FL 33702	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leah R. Cutting*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/03 **727-812-3236**
Date Daytime Phone #

CR2E034 (10/02)