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Jan 23 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 707075 (8)

1. Corporation Name  
MIAMI OBEDIENCE CLUB INC



Principal Place of Business Mailing Address  
TROPICAL PARK 7900 BIRD RD. MIAMI FL 33172 US  
12320 SW 102 COURT MIAMI FL 33176-4871

3. Date Incorporated or Qualified 03/30/1964  
3a. Date of Last Report 03/20/1996  
4. FEI Number 23-7125622 Applied For Not Applicable  
5. Certificate of Status Desired [X] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution [ ] \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [X] No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
HANNA, TRACY  
12320 SW 102 COURT  
MIAMI FL 33176  
10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  
SIGNATURE Tracy Hanna Tracy Hanna President 1/8/97 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D HANNA, TRACY 12320 SW 102 COURT MIAMI FL 33176	11 TITLE	[ ] Change [ ] Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY - ST - ZIP		14 CITY - ST - ZIP	
TITLE	D CHAMBERS, ELIZABETH 549 DESOTO DR. MIAMI SPRINGS FL 33166	21 TITLE	VP [ ] Change [X] Addition
NAME		22 NAME	Ann Lippert
STREET ADDRESS		23 STREET ADDRESS	5840 SW 91 St
CITY - ST - ZIP		24 CITY - ST - ZIP	Miami, FL 33156
TITLE	S/D FERGUSON, ELLEN ROWE 7761 SW 134 AVE. MIAMI FL 33183	31 TITLE	[ ] Change [X] Addition
NAME		32 NAME	Linda Greenfield
STREET ADDRESS		33 STREET ADDRESS	9155 SW 124 St
CITY - ST - ZIP		34 CITY - ST - ZIP	Miami, FL 33176
TITLE	T CHICVARA, CATHERINE 8371 SW 35 TERRACE MIAMI FL 33155	41 TITLE	[ ] Change [ ] Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE	D KLEIN, CAROL ANN 534 NE 94TH ST. MIAMI SHORES FL 33138	51 TITLE	[ ] Change [ ] Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE	[ ] DELETE	61 TITLE	[ ] Change [ ] Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Tracy Hanna Tracy Hanna 1/8/97 (305)251-9668  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0033051

CRZE037 (9/96)