

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707075

FILED  
Apr 11, 2006  
Secretary of State

Entity Name: MIAMI OBEDIENCE CLUB INC

**Current Principal Place of Business:**

TROPICAL PARK  
7900 BIRD RD.  
MIAMI, FL 33155 US

**New Principal Place of Business:**

**Current Mailing Address:**

12703 SW 94 PLACE  
MIAMI, FL 33176 US

**New Mailing Address:**

FEI Number: 23-7125622      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ATKINS, NANCY  
12703 SW 94 PLACE  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GUIN, VIRGINIA  
Address: 12640 SW 99 AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: VD ( ) Delete  
Name: ARZA, MYLENE  
Address: 10775 SW 40 TERRACE  
City-St-Zip: MIAMI, FL 33165

Title: SD ( ) Delete  
Name: GACUSANA, CORI  
Address: 2385 CORAL WAY  
City-St-Zip: MIAMI, FL 33145

Title: SD ( ) Delete  
Name: ARMESTO, CECILIA  
Address: 230 SPRINGS AVENUE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: TD ( ) Delete  
Name: ATKINS, NANCY,  
Address: 12703 SW 94TH PLACE  
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete  
Name: KLEIN, CAROL ANN  
Address: 534 NE 94TH ST.  
City-St-Zip: MIAMI SHORES, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: KOPCO, PATRICIA  
Address: 5363 LAGORCE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD (X) Change ( ) Addition  
Name: LIU, PETER  
Address: 12771 SW 147 STREET  
City-St-Zip: MIAMI, FL 33186

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: SIMON, SHERRY  
Address: 16701 SW 84 COURT  
City-St-Zip: MIAMI, FL 33157

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: NANCY ATKINS

TD

04/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date