

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707075

FILED
Apr 24, 2007
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: KOPCO, PATRICIA
Address: 5363 LAGORCE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

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

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

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

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

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

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

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

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 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

04/24/2007

Electronic Signature of Signing Officer or Director

_____ Date