

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# 712696

Entity Name: FLORIDA GULF COAST DACHSHUND, INC.

Current Principal Place of Business:

FLORIDA GULF COAST DACHSHUND CLUB INC
2705 NORWOOD LANE
VENICE, FL 34292

New Principal Place of Business:

Current Mailing Address:

FLORIDA GULF COAST DACHSHUND CLUB INC
2705 NORWOOD LANE
VENICE, FL 34292

New Mailing Address:

FEI Number: 59-1734632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTORAL, MARY
2705 NORWOOD LANE
VENICE, FL 34292 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: P () Delete
Name: CHILLURA, DEE
Address: 4529 WEST FERN ST
City-St-Zip: TAMPA, FL 33614

Title: RC () Delete
Name: PAULA, HELGA
Address: 10395 SAN MARTIN BLVD
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: S () Delete
Name: BYRNE, ME
Address: 4030 PONEA DR
City-St-Zip: SARASOTA, FL

Title: V () Delete
Name: CASTORAL, MARY
Address: 2705 NORWOOD LN
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: DUBITSKY, BARBARA
Address: 7345 PINE NEEDLE RD
City-St-Zip: SARASOTA, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CHILLURA, DELORES MRS
Address: 4529 WEST FERN ST
City-St-Zip: TAMPA, FL 33614

Title: VP (X) Change () Addition
Name: GRANOWICZ, LUCY MS
Address: 4765 BONNIE BLUE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: RS (X) Change () Addition
Name: DELANEY, CONNIE MS
Address: 17909 PEPPER TREE LANE
City-St-Zip: LUTZ, FL 33548

Title: CS (X) Change () Addition
Name: HROVAT, PATRICIA MS
Address: 13951 SE 98TH STREET
City-St-Zip: DUNNELLON, FL 34431

Title: T (X) Change () Addition
Name: CARDILLO, JEANNE MRS
Address: 115 SUNNYSIDE DRIVE
City-St-Zip: VENICE, FL 34293

Title: DIR () Change (X) Addition
Name: THOMAS, IDA MRS
Address: PO BOX 1212
City-St-Zip: BRADENTON, FL 34206

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: MARY CASTORAL

Electronic Signature of Signing Officer or Director

AGEN

03/31/2009

_____ Date