

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714515

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: SHETLAND SHEEPDOG CLUB OF SOUTHEAST FLORIDA, INC.

**Current Principal Place of Business:**

410 SE 2ND AVE  
POMPANO BEACH, FL 33060 US

**New Principal Place of Business:**

**Current Mailing Address:**

410 SE 2ND AVE  
POMPANO BEACH, FL 33060 US

**New Mailing Address:**

FEI Number: 59-6195023      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STAAB, LORNA  
410 SE 2 AVE  
POMPANO BEACH, FL 33060 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: HOUCHINS, DIONE  
Address: 17941 SW 50TH COURT  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: S ( ) Delete  
Name: KAREN, SALVAGE  
Address: 7748 NW 38TH STREET  
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: T ( ) Delete  
Name: STAAB, LORNA  
Address: 410 S.E. SECOND AVE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete  
Name: HECTOR, HECTOR  
Address: 1100 SW 128TH DRIVE  
City-St-Zip: DAVIE, FL 33325

Title: D ( ) Delete  
Name: LANNON, MARYANN  
Address: 8440 PALIMINE DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: VP ( ) Delete  
Name: HECTOR, MEREDITH  
Address: 1100 SW 128TH DRIVE  
City-St-Zip: DAVIE, FL 33325

**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  
Name:  
Address:  
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: LORNA L. STAAB

T

03/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date