

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724548

FILED
Apr 21, 2008
Secretary of State

Entity Name: JUPITER/TEQUESTA DOG CLUB, INC.

Current Principal Place of Business:

PO BOX 304
JUPITER, FL 334680304 US

New Principal Place of Business:

FAU - 5353 PARKSIDE DRIVE
HARRIET L. WILKES BLDG. ROOM 101
JUPITER, FL 33458 US

Current Mailing Address:

PO BOX 304
JUPITER, FL 334680304 US

New Mailing Address:

FEI Number: 59-1740663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANG, BARBARA
416 PITTSBURGH DRIVE
JUPITER, FL 33458 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: D () Delete
Name: PARSONS, MAUREEN
Address: 122 JESSUP LN, W
City-St-Zip: JUPITER, FL 334585279

Title: S () Delete
Name: GRINELS, SUZANNE
Address: 903 SW KEETS AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: T () Delete
Name: KOLLMAN, CATHY
Address: 10233 150TH RD
City-St-Zip: JUPITER, FL 33478

Title: P () Delete
Name: BOYD, PAT
Address: 6843 143RD STREET NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418 72

Title: D () Delete
Name: BALLINGER, WYNNE
Address: 235 BANYON ROAD
City-St-Zip: PALM BEACH, FL 33480

Title: V () Delete
Name: KUTSUKOS, JEANNEANE
Address: 18291 126TH TERRACE NORTH
City-St-Zip: JUPITER, FL 33478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GRINELS, SUZANNE
Address: 903 SW KEATS AVE
City-St-Zip: PALM CITY, FL 34990

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

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

Title: D (X) Change () Addition
Name: BILLINGS, ROBIN
Address: 3557 WILLIAM STREET
City-St-Zip: LAKE PARK, FL 33403

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: CATHY KOLLMAN

T

04/21/2008

Electronic Signature of Signing Officer or Director

Date