

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756635

FILED
Feb 19, 2007
Secretary of State

Entity Name: CENTRAL FLORIDA DOG HUNTERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

PO BOX 202
ALTOONA, FL 327020202 US

New Principal Place of Business:

HWY 19
ALTOONA, FL 32702 US

Current Mailing Address:

PO BOX 202
ALTOONA, FL 327020202 US

New Mailing Address:

FEI Number: 59-2951916 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, ANDY
11485 SE 187TH TERRACE
OCKLAWAHA, FL 32179 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: BOYD, ANDY
Address: 11485 S.E. 187TH TERRACE
City-St-Zip: OCKLAWAHA, FL 32179 US

Title: VP () Delete
Name: BRYANT, GEORGE
Address: PO BOX 1263
City-St-Zip: ALTOONA, FL 32702 US

Title: D () Delete
Name: COOK, CHRIS
Address: 439435 STERLING RD
City-St-Zip: PAISLEY, FL 32767 US

Title: D () Delete
Name: DURDEN, TIMOTHY
Address: 1209 CAMP AVENUE
City-St-Zip: MT. DORA, FL 32757 US

Title: T () Delete
Name: BRYANT, MARGARET
Address: 45437 NORTH HIGHWAY 19
City-St-Zip: ALTOONA, FL 32702 US

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: T (X) Change () Addition
Name: BRYANT, MARGARET
Address: PO BOX 1263
City-St-Zip: ALTOONA, FL 32702 US

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: MARGARET A BRYANT

T

02/19/2007

Electronic Signature of Signing Officer or Director

_____ Date