

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006044

FILED
Aug 06, 2008
Secretary of State

Entity Name: CANE CORSO ASSOCIATION OF AMERICA INC.

Current Principal Place of Business:

920 S SR 415
NEW SMYRNA, FL 32168

New Principal Place of Business:

Current Mailing Address:

920 S SR 415
NEW SMYRNA, FL 32168

New Mailing Address:

7452 TORREY ROAD
SWARTZ CREEK, MI 48473

FEI Number: 43-2092466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
TALLAHASSEE, FL 323012960 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: ERTASKIRAN, MICHAEL
Address: 58 TUNIS AVE
City-St-Zip: BRONX, NY 10708

Title: V () Delete
Name: DYAL, VICKY
Address: 920 S. STATE ROAD 415
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S () Delete
Name: CRESSIA, KATHY
Address: 735 7TH RIDGE ROAD
City-St-Zip: WALLINGFORD, CT 06492

Title: T () Delete
Name: JARBEAU, LAURA
Address: 7452 TORREY ROAD
City-St-Zip: SWARTZ CREEK, MI 48473

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:

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: LAURA JARBEAU

T

08/06/2008

Electronic Signature of Signing Officer or Director

_____ Date