

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N15261

1. Entity Name

HEARTLAND DOG CLUB, INCORPORATED OF FLORIDA

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90861 027 ****61.25

Principal Place of Business

3940 SKIPPER RD
C/O LAURA VAN HORN
SEBRING FL 33872
US

Mailing Address

3940 SKIPPER ROAD
C/O LAURA VAN HORN
SEBRING FL 33872-6291
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2877619

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAN HORN, LAURA
3940 SKIPPER ROAD
SEBRING FL 33872

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME VAN HORN, LAURA
STREET ADDRESS 3940 SKIPPER RD
CITY-ST-ZIP SEBRING FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME POLNY, ANN
STREET ADDRESS 5500 SR 66
CITY-ST-ZIP SEBRING FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME HUDSON, D
STREET ADDRESS 3744 SKIPPER RD
CITY-ST-ZIP SEBRING FL 33872

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE RSD ☐ Delete
NAME WINEGARD, S
STREET ADDRESS 646 MEL SMITH RD
CITY-ST-ZIP AVON PK FL 33826

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME BARTLEY, L
STREET ADDRESS 2000 FLOWER TERRACE
CITY-ST-ZIP SEBRING FL 33872

TITLE Director ☐ Change ☒ Addition
NAME DOROTHY FOSTER
STREET ADDRESS 1059 Fernvale Ave
CITY-ST-ZIP Sebring, FL 33870

TITLE D ☐ Delete
NAME TRUAY, RUTH
STREET ADDRESS 2990 DOWNING AVE
CITY-ST-ZIP SEBRING FL 33870

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other live empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)