

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 26 1996 8:00 am  
Secretary of State

DOCUMENT # **N93000000579 (3)**

1. Corporation Name

**THE GERMAN SHEPHERD DOG CLUB OF ORLANDO INC.**

Principal Place of Business

P O BOX 520715  
LONGWOOD FL 32752-0715

Mailing Address

P O BOX 520715  
LONGWOOD FL 32752-0715

3. Date Incorporated or Qualified  
**02/08/1993**

3a. Date of Last Report  
**03/09/1995**

2. Principal Place of Business

21 **P.O. Box 520520**

2a. Mailing Address

26 **P.O. Box 520520**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **Longwood FL**

City & State

28 **Longwood FL**

Zip

24 **32752-0520**

Country

25 **SEM**

Zip

29 **32752-0520**

Country

30 **SEM**

4. FEI Number

**NOT APPLICABLE**

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**WILCK, ARLENE  
114 SWEETBRIAR BRANCH  
LONGWOOD FL 32750**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Arle Wilck*

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

(NOTE: Registered Agent signature required when reinstating)

**2/3/96**

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PD  
RADZEVICH, KARL W.  
1400 LINCOLNWOOD LN  
LONGWOOD FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VD  
SWARTZ, SYBLE  
1563 W BERESFORD  
DELAND FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SD  
FRIESEL, BARBARA  
1944 POINSETTA DR  
DAYTONA BEACH FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**TD  
WILCK, ARLENE  
114 SWEETBRIAR BRANCH  
LONGWOOD FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
WEST, RON  
530 HAMILTON DR  
ORLANDO FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
WILCK, ERNIE  
114 SWEETBRIAR BRANCH  
LONGWOOD FL**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Karl W. Radzewich*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/3/96**  
Date

**407 7679567**  
Daytime Phone #

CR2E037 (12/95)