


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N93000000579					
1. Entity Name THE GERMAN SHEPHERD DOG CLUB OF ORLANDO INC.					
Principal Place of Business 123 LARRY RD LAKELAND FL 33809 US			Mailing Address 123 LARRY RD LAKELAND FL 33809 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number NO-T APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RADZEVICH, BETTY A 123 LARRY RD. LAKELAND FL 33809			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. I am familiar with, and accept, the obligations of registered agent.					
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 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	MCCORMICK, JOHN			NAME	
STREET ADDRESS	218 FOX LAKE DR			STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809-2210			CITY-ST-ZIP	
TITLE	VP	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	FEE, GEORGE MR.			NAME	
STREET ADDRESS	2311 DUFF RD.			STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33810			CITY-ST-ZIP	
TITLE	S	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	MCCORMICK, ERIKA			NAME	
STREET ADDRESS	218 FOX LAKE DR			STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809-2210			CITY-ST-ZIP	
TITLE	T	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	RADZEVICH, BETTY A			NAME	
STREET ADDRESS	123 LARRY RD			STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	RADZEVICH, KARL			NAME	
STREET ADDRESS	123 LARRY RD.			STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	FEE, DAGMAR			NAME	
STREET ADDRESS	2311 DUFF RD.			STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33810			CITY-ST-ZIP	



1st MOORE CR2E037 (10/05)

4. FEI Number **NO-T APPLICABLE** Applied For Not Applied For

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		
RADZEVICH, BETTY A 123 LARRY RD. LAKELAND FL 33809			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3-16-06 407 267 953