

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90010 019 ****61.25

DOCUMENT # N96000004167

1. Entity Name
 SPACE COAST THERAPY DOGS, INC. ✓

Principal Place of Business **Mailing Address**
 1321 Emerson Drive, N.E. 1321 Emerson Drive, N.E.
 Palm Bay, FL 32907 Palm Bay, FL 32907

2. Principal Place of Business **3. Mailing Address**
 1255 Leslie Drive 1255 Leslie Drive
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 Merritt Island, FL Merritt Island, FL
Zip **Country** **Zip** **Country**
 32952 USA 32952 USA

4. FEI Number **Applied For**
 59-3407246 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Trudy Howard
 1321 Emerson Drive, N.E.
 Palm Bay, FL 32907

7. Name and Address of New Registered Agent
Name Louise Curry
Street Address (P.O. Box Number is Not Acceptable) 1255 Leslie Drive
City Merritt Island **FL** **Zip Code** 32952

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 *Louise Curry* Louise Curry, President 02/23/01
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 **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

Make Check Payable to:
Department of State

10. OFFICERS AND DIRECTORS	
TITLE D/V NAME HULME, MARILYN STREET ADDRESS 915 Jamestown Drive CITY-ST-ZIP Rockledge, FL 32955	<input type="checkbox"/> Delete
TITLE D NAME COSTELLO, CLARICE STREET ADDRESS 514 Brightwaters Drive CITY-ST-ZIP Cocoa Beach, FL 32931	<input checked="" type="checkbox"/> Delete
TITLE D NAME HOLDER, ANN STREET ADDRESS 945 Indian River Drive CITY-ST-ZIP Cocoa, FL 32922	<input checked="" type="checkbox"/> Delete
TITLE D/P NAME CURRY, LOUISE STREET ADDRESS 1255 Leslie Drive CITY-ST-ZIP Merritt Island, FL 32952	<input type="checkbox"/> Delete
TITLE D/S NAME DAVIDSON, HAL STREET ADDRESS 1365 Montego Street CITY-ST-ZIP Titusville, FL 32780	<input type="checkbox"/> Delete
TITLE D/V NAME HONEYCUTT, LINDA STREET ADDRESS 1618 Emmaus Road, N.W. CITY-ST-ZIP Palm Bay, FL 32907	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D/V NAME MERRILL, RUTH STREET ADDRESS 1738 Nicklaus Drive CITY-ST-ZIP Melbourne, FL 32935	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D/T NAME HOWARD, TRUDY STREET ADDRESS 581 Drexel Avenue, N.E. CITY-ST-ZIP Palm Bay, FL 32907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition (address only)
TITLE D NAME BOMAN, BETTY STREET ADDRESS 160 Cinnamon Drive CITY-ST-ZIP Satellite Beach, FL 32937	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME CHAN, MELANIE STREET ADDRESS 465 Blakey Boulevard CITY-ST-ZIP Cocoa Beach, FL 32931	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME DAVIDSON, ADEL STREET ADDRESS 1365 Montego Street CITY-ST-ZIP Titusville, FL 32780	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME NEZOL, JAMIE STREET ADDRESS 3342 Meadowridge Drive CITY-ST-ZIP Melbourne, FL 32901	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 like empowered.

SIGNATURE: *Trudy Howard* Trudy Howard, Treasurer 3/5/01 (321) 674-1741
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/00)

A0032683

DO NOT WRITE IN THIS SPACE

Attachment
A032683

SPACE COAST THERAPY DOGS, INC.

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#11 – Additions/Deletions/Changes to Officers and Directors

Addition:

RICHARD SOPER D
470-E. Merrimac Drive
Merritt Island, FL 32952

Deletions:

KATHLEEN KESSEL D
353 Brickell Street, S.E.
Palm Bay, FL 32909

GEORGE SHAW D
4845 Key Madeira Drive
Titusville, FL 32780