

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000148962

FILED  
Jan 24, 2009  
Secretary of State

Entity Name: DOGSTOWN UNIVERSITY, INC.

## Current Principal Place of Business:

1807 S POWERLINE RD STE B109  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

1807 S POWERLINE RD STE B109  
B-109  
DEERFIELD BEACH, FL 33442

## Current Mailing Address:

1807 S POWERLINE RD STE B109  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

1807 S POWERLINE RD STE B109  
B-109  
DEERFIELD BEACH, FL 33442

FEI Number: 20-8013859

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FEINGOLD, IRIS  
1807 S POWERLINE RD STE B109  
DEERFIELD BEACH, FL 33442 US

## Name and Address of New Registered Agent:

FEINGOLD, IRIS  
1807 S POWERLINE RD STE B109  
B-109  
DEERFIELD BEACH, FL 33442 US

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: IRIS FEINGOLD

01/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FEINGOLD, IRIS  
Address: 22841 WARRICK WOOD COURT  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: FEINGOLD, NORMAN  
Address: 22841 WARRICK WOOD COURT  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: FEINGOLD, ADAM  
Address: 22841 WARRICK WOOD COURT  
City-St-Zip: BOCA RATON, FL 33433

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IRIS FEINGOLD

D

01/24/2009

Electronic Signature of Signing Officer or Director

Date