## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 701473**

FILED Feb 18, 2004 Secretary of State

Entity Name: DOG TRAINING CLUB OF ST PETERSBURG INC

**Current Principal Place of Business: New Principal Place of Business:** C/O STAPLETON & SMITH, P.A. 6600 34 AVE. NO. ST. PETERSBURG, FL 33710 **New Mailing Address: Current Mailing Address:** C/O STAPLETON & SMITH, P.A. 6600 34 AVE. NO. ST. PETERSBURG, FL 33710 FEI Number: 23-7099551 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, TED C/O STAPLETON & SMITH, P.A. 6600 34 AVE. NO. ST. PETERSBURG, FL 33710 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition WAGNER, SANDY WAGNER, SANDY Name: Name: 11340 69 AVE N Address: 3628 59TH WAY N. Address: City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: ST. PETERSBURG, FL 33710 Title: SD () Delete Title: () Change () Addition WALKER, VIGINIA Name: Name: Address: 4690 36TH AVENUE NORTH Address: City-St-Zip: ST. PETERSBURG, FL City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition RANDAL, RUKSTELE Name: TOTH, TED Name: 11950 81 AVE NO. Address: Address: 9945 60TH STREET N. City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: PINELLAS PARK, FL 33782 ( ) Delete Title: Title: (X) Change ( ) Addition Name: MILES, DIANE Name: CONROY, ALAN 7497 RIDGE ROAD Address: Address: 5925 110TH AVENUE N. City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: PINELLAS PARK, FL 33782 Title: () Delete Title: (X) Change ( ) Addition DUNFORD, APRIL BALLOU, JOAN Name: Name: 6300 86 AVE N 426 LORA LANE Address: Address: City-St-Zip: PINELLAS PARK, FL 33782 City-St-Zip: TARPON SPRINGS, FL 34688 Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JOAN BALLOU TD 02/18/2004

BARON FLLIOT

4326 YARDLEY AVE. N.

SAINT PETERSBURG, FL 33713

Name:

Address:

City-St-Zip: