

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N00000006121 1. Entity Name DOG AGILITY COMPETITION OF FLORIDA, INC.				FILED 05 AUG 19 AM 10:29 TALLAHASSEE, FLORIDA 7811-47th St. N. - 05 7/16/05	
Principal Place of Business 2133 5TH AVE N ST PETERSBURG, FL 33713		Mailing Address 2133 5TH AVE N ST PETERSBURG, FL 33713			
2. Principal Place of Business 7811-47th St. N.		3. Mailing Address 7811-47th St. N.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07112005 REIN-NP CR2E099 (6/04)	
City & State Pinellas Park FL		City & State Pinellas Park FL		4. FEI Number 59-3709722	
Zip 33781		Country USA		Applied For Not Applicable	
Zip 33781		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KILLEEN, JOANNE F 5000 PARK BLVD. #1 PINELLAS PARK, FL 33781			7. Name and Address of New Registered Agent Name Joanne F. Killeen Street Address (P.O. Box Number is Not Acceptable) 7811-47th St. N. City Pinellas Park FL Zip Code 33781		
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 <u><i>Joanne F. Killeen</i></u> <u>Joanne F. Killeen</u> <u>7/16/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$297.50			Make check payable to Florida Department of State		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REED, RANDY 1142 NE 91ST STREET MIAMI, FL 331383452	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 900057854249 07/25/05--01041--006 **236.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COURTNEY, JOHN 1920 MICHELS DRIVE NE PALM BAY, FL 32905	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000058904470 08/24/05--01005--005 **61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HALMAN, YVONNE 1424 DANN STREET ORLANDO, FL 32804	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T YORK, JOHN 4201 WESTGATE AVE #5-A WEST PALM BEACH, FL 33409	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANNA, TRACY 8875 SW 129TH TERR MIAMI, FL 33176	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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: <u><i>John A. York</i></u> <u>John A. York</u> <u>7/17/05</u> <u>561-686-3575</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 2, 2005

DOG AGILITY COMPETITION OF FLORIDA, INC.
7811-47TH STREET NORTH
PINELLAS PARK, FL 33781

SUBJECT: DOG AGILITY COMPETITION OF FLORIDA, INC.
Ref. Number: N00000006121

We have received your document for DOG AGILITY COMPETITION OF FLORIDA, INC. and check(s) totaling \$236.25. However, your check(s) and document are being returned for the following:

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2004 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application or annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year.

Therefore, the total amount due to reinstate the corporation is \$297.50. Add an additional \$8.75 for each certificate of status requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott
Document Specialist

Letter Number: 605A00049796