

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000006121

1. Entity Name
DOG AGILITY COMPETITION OF FLORIDA, INC.



Principal Place of Business
**7811 - 47TH ST N
PINELLAS PARK, FL 33781**

Mailing Address
**7811 - 47TH ST N
PINELLAS PARK, FL 33781**



01202006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3709722

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KILLEEN, JOANNE F
7811 - 47TH ST N
PINELLAS PARK, FL 33781**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	
NAME	REED, RANDY	
STREET ADDRESS	1142 NE 91ST STREET	
CITY- ST- ZIP	MIAMI, FL 331383452	
TITLE	VP	
NAME	COURTNEY, JOHN	
STREET ADDRESS	1820 MICHELS DRIVE NE	
CITY- ST- ZIP	PALM BAY, FL 32905	
TITLE	SD	
NAME	HALMAN, YVONNE	
STREET ADDRESS	1424 DANN STREET	
CITY- ST- ZIP	ORLANDO, FL 32804	
TITLE	T	
NAME	YORK, JOHN	
STREET ADDRESS	4201 WESTGATE AVE #5-A	
CITY- ST- ZIP	WEST PALM BEACH, FL 33409	
TITLE	D	
NAME	HANNA, TRACY	
STREET ADDRESS	8875 SW 120TH TERR	
CITY- ST- ZIP	MIAMI, FL 33176	
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

U00000396357
01/30/06-80008-002 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

John A. York

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/06 561-686-3575

Date

Daytime Phone #