

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90045 013 ****61.25

DOCUMENT # N00000001950			
1. Entity Name HERNANDO COUNTY KENNEL CLUB, INC.			
Principal Place of Business P. O. BOX 5010 SPRING HILL, FL 34611		Mailing Address P. O. BOX 5010 SPRING HILL, FL 34611	
2. Principal Place of Business P.O. Box 5509		3. Mailing Address P.O. Box 5509	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Spring Hill FL		City & State Spring Hill FL	
Zip 34611		Zip 34611	
Country Hernando		Country Hernando	
4. FEI Number 59-3323168		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAKUC, AFRED D 13375 CORTEZ BLVD. BROOKSVILLE, FL 34613		7. Name and Address of New Registered Agent Name Patricia Keohane Street Address (P.O. Box Number is Not Acceptable) 14113 Andrew Scott Rd. City Spring Hill FL Zip Code 34609	
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 <i>Patricia Keohane</i> DATE 4/27/03 Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent's signature required when resigning)			
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
		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 DRAGONSWAN, VALERIA 3484 DELTONA BLVD SPRING HILL, FL 34606 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP 6272 Arizona St. Brooksville FL 34601 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RENT, FRED 12904 TEAKWOOD BAYONET POINT, FL 34667 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Fred Welsch 18168 Clearview Dr. Brooksville, FL 34609 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MAKUC, VIRGINIA 13375 CORTEZ BLVD BROOKSVILLE, FL 34613 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Pat Keohane 14113 Andrew Scott Rd. Spring Hill FL 34609 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FULTON, BARBARA 1352 AUTUMN ROAD SPRING HILL, FL 34606 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cathy Choppy 18703 Drayton St. Spring Hill FL 34610 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARHAUER, SUE 35442 POWELL ROAD BROOKSVILLE, FL 34613 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Sue Bathauer 25442 Powell Rd. Brooksville, FL 34602 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WELSCH, BETTY 18168 CLEARVIEW DRIVE BROOKSVILLE, FL 34609 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lee Gelderman 1320 Stallings Rd Ave. Spring Hill FL 34606 ☐ Change ☐ 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: <i>Sue Bathauer Treas (Sue Bathauer)</i> DATE 4/27/03 352-754-9030 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E037 (10/02)