

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 701473

**Entity Name:** DOG TRAINING CLUB OF ST PETERSBURG INC**Current Principal Place of Business:**4400 B 34TH ST N  
ST. PETERSBURG, FL 33714**Current Mailing Address:**4400 B 34TH ST N  
ST. PETERSBURG, FL 33714 US**FEI Number:** 23-7099551**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLEMAN, ILONA I  
4400 B 34TH ST N  
ST PETERSBURG, FL 33714 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:** ILONA I COLEMAN

04/29/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	COLEMAN, LONI
Address	1425 DEXTER DR
City-State-Zip:	CLEARWATER FL 33756

Title	PRESIDENT
Name	MILES, DIANE
Address	5930 110TH AVE NORTH
City-State-Zip:	PINELLAS PARK FL 33782

Title	VP
Name	SALVAS, FRANCES
Address	4400 B 34TH ST N
City-State-Zip:	ST. PETERSBURG FL 33714

Title	TRUSTEE
Name	MAXFIELD, AMY
Address	4400-B 34TH STREET N
City-State-Zip:	ST PETERSBURG FL 33714

Title	SECRETARY
Name	LIPSIO, JULIA
Address	5930 110TH AVE NORTH
City-State-Zip:	PINELLAS PARK FL 33782

Title	TRUSTEE
Name	BREHM, BARBARA
Address	4400 B 34TH STREET N
City-State-Zip:	SAINT PETERSBURG FL 33714

Title	2ND VP
Name	WELSH, DEBORAH
Address	4400 B 34TH STREET N
City-State-Zip:	SAINT PETERSBURG FL 33714

*I hereby 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 all other like empowered.*

**SIGNATURE:** LONI COLEMAN

TREASURER

04/29/2020

Electronic Signature of Signing Officer/Director Detail

Date