2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # 181958

1. Entity Name

WASHINGTON COUNTY KENNEL CLUB,

INCORPORATED

Principal Place of Business

EBRO, FL 32437 US

6558 DOG TRACK RD

Mailing Address

6558 DOG TRACK RD EBRO, FL 32437 US







04232007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-0749464

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HESS, STOCKON R 6512 DOG TRACK RD

DO NOT WRITE

EBRO, FL 32437			IN THIS SPACE		
8. The above the obligat	e named entity submits this statement for the ptions of registered agent.	ourpose of changing its registered	d office or r	egistered agent, or bo	ith, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000753673 05/22/07-80029-024 150.00
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO HESS, STOCKON R 6512 DOG TRACK RD EBRO, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HESS, HARRY L 6558 DOG TRACK RD EBRO, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HATER, JOHN M. 11508 TRASK S. TAMPA, FL 33627		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HATER, ROBERT E. II 1330 NEEB RD CINCINNATI. OH 45233			IN T	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 607, 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:

VPD

AS

AUSTIN, PAULETTE

LUTZ, FL 33548

TAMPA, FL

17315 LINDA VISTA CIR

HESS, MARGARET G

10102 WOODSONG WAY

TITLE NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Stockton R. Hess

4/24/07

850-234-3943

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #