

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

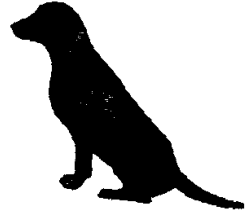
FILED
Aug 17, 2005 8:00 am
Secretary of State

07-27-2005 90049 049 ***150.00

DOCUMENT # 384999 1. Entity Name ROBINHOOD KENNELS, INC.					
Principal Place of Business 5025 ROBINHOOD KENNELS ROAD TALLAHASSEE FL 32303			Mailing Address 5025 ROBINHOOD KENNELS ROAD TALLAHASSEE FL 32303		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 59-1362094 Applied For <input type="checkbox"/> Not Applicable	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRANT, LYN 5017 ROBINHOOD KENNELS ROAD TALLAHASSEE FL 32303				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ (NOTE: Registered Agent signature required when terminating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P GRANT, LYN 5017 ROBINHOOD KENNELS ROAD TALLAHASSEE FL 32303		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V GRIFFIN, JAY 6500 OLD BAINBRIDGE RD TALLAHASSEE FL 32303		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D GRANT, PAUL D 5017 ROBINHOOD KENNELS ROAD TALLAHASSEE FL 32303		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	
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 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: <u>Lyn Grant</u> <u>Lyn Grant</u> <u>July 22, 2005</u> <u>850-562-4503</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT # 384999
#0025870
ROBINHOOD KENNELS, INC.
RT. 2 - BOX 142 • OLD DAINBRIDGE ROAD • TALLAHASSEE, FLORIDA 32303
5025 Robinhood Kennel Rd PHONE (904) 562-4503
850
LYN GRANT
PAUL GRANT

Aug 16, 2005



Florida Department of State
To whom it may concern:

I am re-submitting this form and copy of letter to you and stating that I did not get anything in the mail before July 2005 concerning filing my annual corporation report. I sent this back in within 5 days after receiving the late notice and didn't read the fine print about May 1. This was my first notice of filing I received.

Sincerely,
Lyn Grant



ATTACHMENT
66625870

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 29, 2005

ROBINHOOD KENNELS, INC.
5025 ROBINHOOD KENNELS ROAD
TALLAHASSEE, FL 32303

Subject: **ROBINHOOD KENNELS, INC.**

Reference Number: **384999**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

The only provision the Division of Corporations has for waiver of the \$400.00 late fee is if the annual report notice was not received. A letter stating this fact must accompany the completed annual report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS
ANNUAL REPORTS SECTION

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314