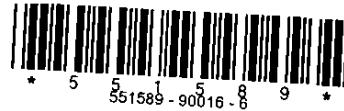


FILED
May 15, 1999 8:00 am
Secretary of State

05-15-1999 90016 006 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 655760	
1. Corporation Name CONNELL KENNELS, INC.	



Principal Place of Business 15901 ACORN CIRCLE TAVARES, FL		Mailing Address P.O. BOX 950550 LAKE MARY, FL 32795-0550		DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 21 Suite, Apt. #, etc. - 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 02-14-80	
4. FET Number 59-1949077		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		7. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent RODNEY CONNELL 15901 ACORN CIRCLE TAVARES, FL			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstalling)		DATE	
12. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD CONNELL, ARNELL G. 15901 ACORN CIRCLE TAVARES, FL	☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CONNELL, MARK B. 3479 NE COUNTY RD 337 HIGH SPRINGS, FL 32655	☐ DELETE		☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CONNELL, RODNEY H. 15901 ACORN CIRCLE TAVARES, FL	☐ DELETE		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CONNELL, MELINDA JANE 935 COUNTY RD 466A FRUITLAND PARK, FL 34731	☐ DELETE		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ DELETE		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ DELETE		☐ Change ☐ Addition	

7717 SW 57th BLVD
 GAINESVILLE FL 32608

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 with all other like empowered