2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# 655760

Entity Name: CONNELL KENNELS, INC.

Current Principal Place of Business:

2990 LAKE WOODWARD DR
EUSTIS, FL 32726 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9505500
LAKE MARY, FL 32795 US

New Mailing Address:

FEI Number: 59-1949077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONNELL, RODNEY H
2990 LAKE WOODWARD DR
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: CONNELL, RODNEY
Address: 2990 LAKE WOODWARD DR
City-St-Zip: EUSTIS, FL 32726 US

Title: PD ( ) Delete
Name: CONNELL, ARNELL G
Address: 2990 LAKE WOODWARD DR
City-St-Zip: EUSTIS, FL 32726 US

Title: VPD ( ) Delete
Name: CONNELL, MARK B
Address: 6 LEGACY BLVD
City-St-Zip: SAVANNAH, GA 31419 US

Title: VPD ( ) Delete
Name: STULTZ, MELINDA C
Address: 3130 BULKLEY PL
City-St-Zip: EUSTIS, FL 32726 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: VAN DOREN, MELINDA C
Address: 3130 BULKLEY PL
City-St-Zip: EUSTIS, FL 32726 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARNELL G CONNELL PD 02/02/2009

Electronic Signature of Signing Officer or Director — Date