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May 02, 2007 8:00 am
Secretary of State
04-16-2007 90077 041 ****61.25

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 718036

1. Entity Name
OKALOOSA KENNEL CLUB, INC.

Principal Place of Business	Mailing Address
106 WILDER STREET NICEVILLE, FL 32578 US	P O BOX 2246 FT WALTON BEACH, FL 32549 US

04122007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7101562 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STILLWELL, WILLIAM K 106 WILDER STREEET NICEVILLE, FL 32578	Name: Mc MICHAEL, SEAN Street Address (P.O. Box Number is Not Acceptable): 2848 Aplin Road City: Crestview **FL** Zip Code: 32539

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.

SIGNATURE: Sean McMichael, Treasurer 28 Apr 07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CSD BURES, SANDRA 3006 YORKTOWN CIR FORT WALTON BEACH, FL 32547	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CSD JAMES, KAREN 1009 Shoal River Drive Crestview, FL 32539	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STILLWELL, GAYLE 106 WILDER ST NICEVILLE, FL 32578	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MILLER, JERRY 91 BAYWINDS Drive Destin, FL 32541	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STILLWELL, WILLIAM K 106 WILDER STREET NICEVILLE, FL 32578	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD McMICHAEL, Sean 2848 APLIN ROAD Crestview, FL 32539	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RSD BRANCH, WILLIAM 871 BROOKMEADE DRIVE CRESTVIEW, FL 32539	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MILLER, JERRY 91 BAYWINDS DR DESTIN, FL 32541	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD PHILPOT, Vince 451 Sandmore Shores Drive Mary Esther, FL 32569	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 617, 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: WILLIAM K. STILLWELL William K. Stillwell April 12, 2007 850-729-3546
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #