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Mar 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 718501 (0)

1. Corporation Name

FLORIDA WEST COAST DOBERMAN PINSCHER CLUB, INC.

STATE TAX NUMBER 39-00-60-433-51

Principal Place of Business

Mailing Address

4702 FOX HUNT DR
TAMPA FL 33624

4702 FOX HUNT DR
TAMPA FL 33624-1545



3. Date Incorporated or Qualified
05/14/1970

3a. Date of Last Report
04/19/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
23-7127839

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, ROY

14814 N. ROME 25078 Dan Brown Hill Rd.
TAMPA FL 33613 Brooksville, FL 34602-6212

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T ☐ DELETE
NAME HOLM, ELAINE
STREET ADDRESS 4702 FOX HUNT DR
CITY - ST - ZIP TAMPA FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

D ☒ DELETE
NAME DEBORKY, TERRI
STREET ADDRESS 104 W. SENECA STE. 5
CITY - ST - ZIP TAMPA FL 33612

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME Board of Directors
2.3 STREET ADDRESS Linda Brasted
2.4 CITY - ST - ZIP 120 Talley Ct.
Palm Harbor, FL 34684

SD ☐ DELETE
NAME SMITH, SUSAN
STREET ADDRESS 14814 N. ROME AVENUE
CITY - ST - ZIP TAMPA FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 25078 Dan Brown Hill Rd.
3.4 CITY - ST - ZIP Brooksville, FL 34602-6212

V ☒ DELETE
NAME SMITH, ROY
STREET ADDRESS 14814 N. ROME
CITY - ST - ZIP TAMPA, FL 00000

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME Board of Directors
4.3 STREET ADDRESS Herma Fireman
4.4 CITY - ST - ZIP 1721 Hampton Ln.
Clearwater, FL 34616

D ☐ DELETE
NAME HOLM, JIM
STREET ADDRESS 4702 FOX HUNT DR
CITY - ST - ZIP TAMPA FL

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP Vice-President

P ☐ DELETE
NAME COMBS, PAUL
STREET ADDRESS 13504 GALENA PLACE
CITY - ST - ZIP TAMPA FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Elaine Holm
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/20/97 813 962-6611
Date Daytime Phone # 0048735

CR2E037 (9/96)