2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 25, 2004 8:00 am Secretary of State

DOCUMENT # 718501 1. Entity Name FLORIDA WEST COAST DOBERMAN PINSCHER CLUB, INC.							2-25-2004 90	0018 047 ***		
13004 CREEK MANOR CT 420			Mailing Address 4207 LAKEWOOD DRIVI SEFFNER, FL 33584	E US						
2. Principal Place of Business 3. Ma			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02212004 Chg-	NP CI	R2E037 (10/03)		
City & State			City & State			4. FEI Number 23-7127839		⊢	Applied For	
Zip	Zip Country		Zip	Zip Country		5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name	and Address of Current R	legistered Agent			7. Name and Addres	s of New Regis	tered Agent		
SMITH, R	nv			Name						
25078 DAI BROOKS\		Street /	Street Address (P.O. Box Number is Not Acceptable)							
				City				FL Zip Co		
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										
	Filing Fee is \$61.25 9. Election Campaign Due by May 1, 2004 Trust Fund Contribu				•		··········			
	_					\$5.00 May Be Added to Fees		check payable Department of \$		
10.	_	lay 1, 2004	Trust Fund C	ontribution.	<u> </u>	Added to Fees	Florida I	Department of 5	State	
10.	_		Trust Fund C	ontribution.		\$5.00 May Be Added to Fees DDITIONS/CHANGES	Florida I	Department of S	N 10	
10. TITLE NAME	Due by N	fay 1, 2004 OFFICERS AND DIRI	Trust Fund C	11.		Added to Fees DDITIONS/CHANGES	Florida I	Department of 5	State	
TITLE	T WADE, KI	fay 1, 2004 OFFICERS AND DIRI	Trust Fund C	ontribution.	D A	Added to Fees DDITIONS/CHANGES TT. CAROL	Florida I	Department of S	N 10	
TITLE NAME	T WADE, KI 4207 LAK	OFFICERS AND DIRI	Trust Fund C	11. THILE NAME	500	Added to Fees DDITIONS/CHANGES TT, CAROL LEONA S	Florida I	Department of S	N 10	
TITLE NAME STREET ADORESS	T WADE, KI 4207 LAK	OFFICERS AND DIRI MBERLY EWOOD DRIVE	Trust Fund C	11. TITLE NAME STREET ADDRESS	D WI 500	Added to Fees DDITIONS/CHANGES TT, CAROL ST, LEONA S MPA F2	Florida I TO OFFICERS A ST 3 3629	Department of \$ ND DIRECTORS I Change	N 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	T WADE, KI 4207 LAK SEFFNER D POKLEPC	OFFICERS AND DIRI MBERLY EWOOD DRIVE R, FL 33584 DVIC, MICHAEL	Trust Fund C	Ontribution. 11. TI'LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D WI 500	Added to Fees DDITIONS/CHANGES TT, CAROL ST, LEONA S MPA F2	Florida I TO OFFICERS A ST 3 3629	Department of \$ ND DIRECTORS I Change	State IN 10 Addition	
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changed, or on an attachment with an address, with all other like empowered.	s, and that my hame a	ppears in block to or block 111
SIGNATURE &MUELLEN & NOODE KIMBUREY L WOODE	2/22/04	813.689-1509
SIGNATURE AND TYPED ON PHINTED NAME OF SIGNENG OFFICER OR DIRECTOR	Date	Daytime Phone #
		