

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 15, 2004 8:00 am**  
**Secretary of State**

03-15-2004 90029 041 \*\*\*\*61.25

**DOCUMENT # 719678**

1. Entity Name

**NORTH FLORIDA AMATEUR RETRIEVER CLUB, INC.**



Principal Place of Business

**5400 VETERANS MEMORIAL DRIVE  
TALLAHASSEE FL 32309**

Mailing Address

**5400 VETERANS MEMORIAL DRIVE  
TALLAHASSEE FL 32309**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**NO-T APPLICABLE**

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

**JOHNSON, RICHARD H  
5400 VETERANS MEMORIAL DRIVE  
TALLAHASSEE FL 32309**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD JOHNSON, RICHARD H 5400 VETERANS MEMORIAL DRIVE TALLAHASSEE FL 32309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD TALLEY, JEFFERY J 6024 LEIGH READ RD TALLAHASSEE FL 32309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD RUSSELL, KAREN J 3042 STILLWOOD CT TALLAHASSEE FL 32308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JOHNSON, JEAN H 5400 VETERANS MEMORIAL DRIVE TALLAHASSEE FL 32309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DUNCAN, WILTON JR 3421 VALLEY CREEK DRIVE TALLAHASSEE FL 32312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MARKS, VALARIE 6383 PISGAH CHURCH ROAD TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WINCHESTER, BRIAN 8705 MINNOW CREEK DRIVE TALLAHASSEE, FL 32312	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I 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 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:

*Karen J Russell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**KAREN J RUSSELL**

**2-28-04**

**850/575-0179**

Date

Daytime Phone #

North Florida Amateur Retriever Club, Inc.  
List of Officers and Directors, continued:

*Attachment  
#719678  
44016860*

10. Officers and Directors

D  
DODSON, WAYNE  
977 PUMMY ROAD  
OCKLOCKONEE, GA 31773

D  
FRISBEE, DARRELL  
3366 NORTH SALT ROAD  
MONTICELLO, FL 32344

Change

1137 IONE ROAD  
PAVO, GA 31778

D  
GOODWIN, THOMAS "BUCK"  
8209 BRISTOL COURT  
TALLAHASSEE, FL 32311

Delete

D  
HAYS, CHARLES  
440 CANNON ROAD  
PAVO, GA 31778

D  
HUMPHREY, LOUISE I.  
MOCCASIN GAP ROAD - WOODFIELD SPRINGS  
MICCOSUKEE, FL 32309

D  
McASSEY, JOHN  
5450 VETERANS MEMORIAL DRIVE  
TALLAHASSEE, FL 32309

D  
ROGERS, DAVID  
P. O. BOX 91050 (N/A)  
MICCOSUKEE, FL 32309