

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723776

FILED
Apr 12, 2007
Secretary of State

Entity Name: GREATER PANAMA CITY DOG FANCIER'S ASSOCIATION, INC

Current Principal Place of Business:

4909 E 11TH STREET
PANAMA CITY, FL 32404 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 2491
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EPLING, SANDIE
3906 BECORA COURT
PANAMA CITY, FL 32405 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRYE, MELISSA
Address: 8926 KINGSWOOD RD
City-St-Zip: SOUTHPORT, FL 32409

Title: VD () Delete
Name: ROBBINS, ANN
Address: 435 S PALO ALTO AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: TD () Delete
Name: EPLING, SANDIE
Address: 3906 BECORA COURT
City-St-Zip: PANAMA CITY, FL 32405

Title: SD () Delete
Name: WINGE, BARBARA
Address: 103 S GAY AVE
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: ADCOCK, MARGARET
Address: 1914 FRANKFORD AVE # 308
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: WEINBERG, DICK
Address: 117SUMMER BREEZE RD
City-St-Zip: PANAMA CITY BEACH, FL 32413

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

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

Title: D (X) Change () Addition
Name: ROBBINS, RICHARD
Address: 435 S. PALO ALTO AVE
City-St-Zip: PANAMA CITY, FL 32401

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDIE EPLING

TD

04/12/2007

Electronic Signature of Signing Officer or Director

Date