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2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #723776 1. Entity Name



FILED Jan 16, 2008 8:00 am Secretary of State

GREÁTER PANAMA CITY DOG FANCIER'S ASSOCIATION, INC								01-16-2	2008 :	90020	020 ****	61.25
Principal Place 4909 E 11TH PANAMA CITY	I STREET	Р0	ng Address BOX 2491 AMA CITY, FL 3240	02			. ⊈ νυυ ≱ . παπαπι	i Hega Hill ikun d	1868 8 769 8	iri) diril ri	NII AIRE AIRE AG	III III II I
2. Principal Place of Business - No P.O. Box # 3. Ma			. Mailing Address									
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Zip	Country	ip Country				5. Certificate of Status Desired						
	6. Name and Address of	of Current Register	ed Agent				7. Name and	Address of h	New Re	gistered	Agent	
EPLING, S	ANDIE				Name /	MAR	GARET	D .	17 Da	COCK	.	
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Thereby certify that the information supplied with this filling does not quelify 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.

IN ARG ARET

IN INDICATE

SIGNATURE AND WARD OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Desymmetric for the certify that the information in Chapter 119, Florida Statutes. I further certify that the information indicates in Chapter 129, 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.

IN ARG ARET

Date

Desymmetric formation supplied with this filling does not quelted and that the information indicates or true to the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustees. In the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; that I am an officer or director of the care indicates in the same legal effect as if made under oath; t

SIGNATURE: