

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725270

FILED
Jan 06, 2004
Secretary of State**Entity Name:** TAMPA BAY PUG CLUB, INC.**Current Principal Place of Business:**17531 GUNLOCK RD.
LUTZ, FL 335588442 US**New Principal Place of Business:****Current Mailing Address:**17531 GUNLOCK RD.
LUTZ, FL 335588442 US**New Mailing Address:****FEI Number:** 65-0131148**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ARD, RANDY
17531 GUNLOCK RD.
LUTZ, FL 33558 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: SD () Delete
Name: NESIUS, DEBI
Address: 490 WILI NKE AVE SW
City-St-Zip: PALM BAY, FL 32098

Title: TD () Delete
Name: ARD, RANDY
Address: 17531 GUNLOCK RD
City-St-Zip: LUTZ, FL 335588442

Title: SD () Delete
Name: CHAMBERLAND, DEBBIE
Address: 7355 BLACKHAWK TRAIL
City-St-Zip: SPRING HILL, FL 34606

Title: D () Delete
Name: ARMSTRONG, LINDA
Address: 1738 ALVARADO CT
City-St-Zip: LONGWOOD, FL 32779

Title: PD () Delete
Name: HUTCHINSON, ANITRA,
Address: 4403 W. ANITA BLVD.
City-St-Zip: TAMPA, FL

Title: VD () Delete
Name: JOYNER, CINDY
Address: 8601 SUNNYDALE LN
City-St-Zip: LAKE LAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: MURPHY, DEBI
Address: 343 HUMBERT STREET NE
City-St-Zip: PALM BAY, FL 32907

Title: TD (X) Change () Addition
Name: ARD, RANDY C
Address: 17531 GUNLOCK RD
City-St-Zip: LUTZ, FL 335588442

Title: PD (X) Change () Addition
Name: CHAMBERLAND, DEBBIE
Address: 7355 BLACKHAWK TRAIL
City-St-Zip: SPRING HILL, FL 34606

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

Title: D (X) Change () Addition
Name: HUTCHINSON, ANITRA,
Address: 4403 W. ANITA BLVD.
City-St-Zip: TAMPA, FL

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RANDY C. ARD

TD

01/06/2004

Electronic Signature of Signing Officer or Director

Date