## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#727899**

FILED Apr 22, 2008 Secretary of State

Entity Name: LAKELAND-WINTER HAVEN KENNEL CLUB, INC.

	Principal Place	of Business:	New Princ	ipal Place of Business:
	TER OAK DR ND, FL 33810	US		
Current I	Mailing Addres	ss:	New Maili	ng Address:
P.O. BOX LAKELAN	( 7247 ND, FL 33807	US		
FEI Numbe	r: 59-1506829	FEI Number Applied For ( )	FEI Number Not App	icable ( ) Certificate of Status Desired ( )
Name an	d Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:
	HOMAS J TER OAK DR ND, FL 33810	US		
	e named entity : te of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,
SIGNATL				
	Electror	nic Signature of Registered Age	ent	Date
OFFICER	RS AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name:	PD ( ) MEISELS, GER	) Delete RRY G	Title: Name:	( ) Change ( ) Addition
Address:	PO BOX 1347		Address: City-St-Zip:	
Address: City-St-Zip: Title: Name: Address:	PO BOX 1347 THONOTOSAS: VD ( ) TUCKER, THOM 597 THORNBU	SA, FL 33592 ) Delete MAS RG RD.	Address:	VD (X) Change ( ) Addition ISAKSON, NANCY 4939 LUCE RD LAKELAND, FL 33813
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	PO BOX 1347 THONOTOSAS:  VD ( ) TUCKER, THON 597 THORNBU BABSON PARK TD ( ) HELL, THOMAS 3920 WATER (	SA, FL 33592  ) Delete MAS RG RD. (, FL 33827  ) Delete S J  DAK DR.	Address: City-St-Zip: Title: Name: Address:	ISAKSON, NANCY 4939 LUCE RD
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip: City-St-Zip: City-St-Zip:	PO BOX 1347 THONOTOSAS:  VD ( ) TUCKER, THOI 597 THORNBUI BABSON PARK  TD ( ) HELL, THOMAS 3920 WATER ( LAKELAND, FL  SD ( ) CURRIE, JENN 5358 STONE O	SA, FL 33592  ) Delete VIAS RG RD. C, FL 33827  ) Delete S J DAK DR. 33810  ) Delete Y DAKS DR.	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	ISAKSON, NANCY 4939 LUCE RD LAKELAND, FL 33813
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	PO BOX 1347 THONOTOSAS:  VD () TUCKER, THON 597 THORNBUI BABSON PARK  TD () HELL, THOMAS 3920 WATER O LAKELAND, FL  SD () CURRIE, JENN 5358 STONE O LAKELAND, FL  D () SNYDER, CARI 117 HICKORY	SA, FL 33592  ) Delete MAS RG RD. (, FL 33827  ) Delete S J DAK DR. ( 33810  ) Delete Y SAKS DR. ( 33811  ) Delete LENE CREEK DR.	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: Address:	ISAKSON, NANCY 4939 LUCE RD LAKELAND, FL 33813  ( ) Change ( ) Addition  SD (X) Change ( ) Addition  VICS, BEVERLY 638 DAVINCI PASS

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS J. HELL T 04/22/2008