## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 729763** 

FILED Jan 06, 2009 Secretary of State

Entity Name: GREAT DANE CLUB OF SOUTH FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 721 N. 72 TERRACE HOLLYWOOD, FL 330245830 US **Current Mailing Address: New Mailing Address:** 721 N. 72 TERRACE HOLLYWOOD, FL 330245830 US FEI Number: 59-1794478 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAIFORD, DIANE L RAIFORD, DIANE G 721 N 72ND TERRACE 721 N 72ND TERRACE HOLLYWOOD, FL 33024 US US HOLLYWOOD, FL 33024 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: DIANE RAIFORD 01/06/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RAIFORD, DIANE Name: Name: 721 N 72ND TERRACE Address: Address: City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: SNEDAKER, PAM Name: Address: 721 N 72ND TERRACE Address: City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: Title: () Delete Title: () Change () Addition RATHBONE, SUE Name: Name: Address: 16394 EDINBURGH DR E Address: City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: Title: ( ) Delete Title: () Change () Addition O'CONNOR, ANDREA Name: Name: PO BOX 8013 Address: Address: City-St-Zip: JUPITER, FL 33468 City-St-Zip: Title: () Delete Title: () Change () Addition SIMMONS, TINA Name: Name: 1064 PINE BRANCH DR Address: Address: City-St-Zip: FT LAUDERDALE, FL 33326 City-St-Zip: Title: () Delete Title: () Change () Addition HIGGINS, MARIA Name: Name: Address: 12940 WILTON RD Address: N PALM BEACH, FL 33408 City-St-Zip: City-St-Zip:

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: DIANE RAIFORD P 01/06/2009