2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2009
Secretary of State

DOCUMENT# 732172

Entity Name: MID-FLORIDA SHETLAND SHEEPDOG CLUB, INC.

Current Principal Place of Business:

9122 TREVARTHON
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

9122 TREVARTHON
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 59-2888771 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ILSE, CARL H.
2015 TRAILSWORD YATH
LAKELAND, FL 33809 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: D ( ) Delete
Name: FREEMAN, SHARON
Address: 3934 CEDAR HAMMOCK TR.
City-St-Zip: ST. CLOUD, FL 34772

Title: D ( ) Delete
Name: LEE, SHERRY
Address: 6620 HICKORY TREE RD
City-St-Zip: ST. CLOUD, FL 34772

Title: TD ( ) Delete
Name: GORDON, SUSAN
Address: 9122 TRAVARTHON
City-St-Zip: ORLANDO, FL 32817

Title: PD ( ) Delete
Name: SMITH, CATHY
Address: 211 RUTH BLVD
City-St-Zip: LONGWOOD, FL 32750

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: P (X) Change ( ) Addition
Name: ROSS, MONICA
Address: 13013 JESUP WOODS COURT
City-St-Zip: ORLANDO, FL 32824

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: SUSAN GORDON T 03/22/2009

Electronic Signature of Signing Officer or Director Date