2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#734078

FILED Apr 20, 2009 Secretary of State

Entity Name: K-9 OBEDIENCE CLUB OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business: 2638 POWERS AVE JACKSONVILLE, FL 32207 **Current Mailing Address: New Mailing Address:** 6642 WELLINGTON PL LANE JACKSONVILLE, FL 32216 FEI Number: 59-2090317 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: BILLINGE, LAURIE PRES 6642 WELLINGTON PL LANE JACKSONVILLE, FL 32216 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BILLINGE, LAURIE Name: Name: 6642 WELLINGTON PL. LN. Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition BUCK, EDWARD Name: JARRETT, GARY Name: Address: 11649 BRUSH RIDGE CIRS Address: 11722 EXMOOR CT City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32256 Title: () Delete Title: (X) Change () Addition WHALEN, COLLEEN STEVENS, CAROL Name: Name: 6769 LAURINA PLACE Address: 2565 TREEMONT ST Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216 Title: TD () Delete Title: () Change () Addition Name: BERRY, ELLEN Name: Address: 7915 FRESCA ST Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: Title: SEC () Delete Title: SEC (X) Change () Addition ZABOROWSKI, PAT CARSTENS, CONNIE Name: Name: 1266 VACUNA RD Address: Address: 224 NEWS ST City-St-Zip: KINGSLAND, GA 31548 City-St-Zip: JACKSONVILLE, FL 32211 Title: () Delete Title: (X) Change () Addition BUTLER, BARBARA STARKEY, JENNIFER Name: Name: Address: 11919 MANDARIN RD. Address: 13391 GROVER RD JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32226 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: LAURIE A. BILLINGE PRES 04/20/2009