

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 735170

1. Entity Name

INDIAN RIVER DOG TRAINING CLUB, INC.

Principal Place of Business

Mailing Address

1480 MEADOWBROOK ROAD N.E.
PO BOX 861
PALM BAY FL 32906-0861
US

P.O. BOX 060861
PO BOX 861
PALM BAY FL 32906-0861
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2858366

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DILLARD, WILLIAM N
1480 MEADOWBROOK RD., N.E.
PALM BAY FL 32905-5007

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE V
NAME RANDALL, GEORGIA
STREET ADDRESS 2300 HALL RD
CITY-ST-ZIP MALABAR FL 32950 ☒ Delete

TITLE S
NAME KESSEL, KATHLEEN
STREET ADDRESS 353 BRICKELL ST., S.E.
CITY-ST-ZIP PALM BAY FL 32909 ☐ Delete

TITLE D
NAME CURTIN, KEVIN
STREET ADDRESS 2230 HOFFNER AVE
CITY-ST-ZIP ORLANDO FL 32809 ☐ Delete

TITLE D
NAME COURTNEY, JOHN
STREET ADDRESS 1920 MICHELS DRIVE N.E.
CITY-ST-ZIP PALM BAY FL ☒ Delete

TITLE P
NAME DILLARD, WILLIAM N
STREET ADDRESS 1480 MEADOWBROOK RD., N.E.
CITY-ST-ZIP PALM BAY FL 32905-5007 ☐ Delete

TITLE D
NAME FETTRON, ART
STREET ADDRESS 1618 GIVENS CT NW
CITY-ST-ZIP PALM BAY FL 32907 ☒ Delete

TITLE V
NAME FETTRON, ART
STREET ADDRESS 1618 GIVENS CT NW
CITY-ST-ZIP PALM BAY FL 32907 ☒ Change ☐ Addition

TITLE Treasurer
NAME Virginia Courtney
STREET ADDRESS 1920 Michels Dr NE
CITY-ST-ZIP Palm Bay FL 32905 ☐ Change ☒ Addition

TITLE D
NAME Carole Davis
STREET ADDRESS 1674 Waneta St SE
CITY-ST-ZIP Palm Bay FL 32909 ☐ Change ☒ Addition

TITLE D
NAME FERRIS, MARCIA
STREET ADDRESS 1618 GIVENS CT NW
CITY-ST-ZIP PALM BAY FL 32907 ☒ Change ☐ Addition

TITLE D
NAME Cheryl Shambora
STREET ADDRESS 13151 83rd St
CITY-ST-ZIP Fellsmere, FL 32948 ☐ Change ☒ Addition

TITLE D
NAME MATZOK, CHRIS
STREET ADDRESS 6925 COTTONWOOD DR
CITY-ST-ZIP GRANT FL 32949 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE REQUIRED

WILLIAM N. DILLARD 07-17-01 (321) 724-2510

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90002 029 ****61.25

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DO NOT WRITE IN THIS SPACE

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