2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746252

FILED Feb 29, 2008 Secretary of State

Entity Name: TAMPA BAY AREA SHETLAND SHEEPDOG CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

6402 W. KNIGHTS GRIFFIN ROAD PLANT CITY, FL 33565

Current Mailing Address: New Mailing Address:

6402 W. KNIGHTS GRIFFIN ROAD PLANT CITY, FL 33565 US

FEI Number: 59-2620722 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:

MUNSEY, WILLIAM 6402 W. KNIGHTS GRIFFIN ROAD PLANT CITY, FL 33565

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 (X) Change () Addition MILES, DIANE JUDY. SMITH Name: Name:

5930 110TH AVENUE NORTH Address: 4044 GALLAGHER ROAD Address: City-St-Zip: PINELLAS PARK, FL 33782 City-St-Zip: PLANT CITY, FL 33565

Title: Title: (X) Change () Addition () Delete DUNFORD, APRIL Name: LORRIE, REED Name:

Address: 6300 86TH AVENUE NORTH Address: 4365 66TH AVENUE NORTH City-St-Zip: PINELLAS PARK, FL 33782 City-St-Zip: PINELLAS PARK, FL 33781

Title: () Delete Title: (X) Change () Addition

REED, LORRIE KEOHANE, PATRICIA Name: Name: 4365 66TH AVENUE NORTH 14113 ANDREW SCOTT ROAD Address: Address: City-St-Zip: PINELLAS PARK, FL 33781 City-St-Zip: SPRING HILL, FL 34609

Title: VD () Delete Title: VD (X) Change () Addition

SMITH, JUDÝ Name: Name: PIROCHTA, ANDREW Address: 4044 GALLAGHER ROAD Address: 2902 W. ROGERS AVENUE

City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: TAMPA, FL 33611

Title: () Delete Title: (X) Change () Addition KEOHANE, PATRICIA MILES, DIANE Name: Name:

14113 ANDREW SCOTT RD 5930 110TH AVENUE NORTH Address: Address:

City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: PINELLAS PARK, FL 33782

Title: () Delete Title: (X) Change () Addition

LIPSIO, JULIA RILEY. STEPHANIE Name: Name: Address: 10265 N. GANDY BLVD #1108 Address: 9438 SWIFT CREEK CIRCLE

SAINT PETERSBURG, FL 33702 DOVER, FL 33572 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: LORRIE REED Т 02/29/2008