2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # 751299 1. Entity Name INVERNESS, FLA. KENNEL CLUB, INC. Principal Place of Business Mailing Address 10073 DOMINGO DR P.O. BOX 372 LECANTO, FL 34460 US DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent ANDERSON, CORAL

10073 DOMINGO DR BROOKSVILLE, FL 34601 FILED Feb 26, 2005 08:00 AM Secretary of State



02182005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-2481794

- Applied For Not Applicat

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the pations of registered agent.	iurpose of changing its registere	d office or a	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title t	f annilirable INDTE Registered	Anent signatur	required when reinstaling)	DATE	
	Signature, types or printed name of agreement agent and the r	apprease. Sector registeres	region (signatur			
	Filing Fee is \$61.25 Due by May 1, 2005	 Election Campaign Finant Trust Fund Contribution. 	cing	\$5.00 May Be Added to Fees		
10,	OFFICERS AND DIREC	CTORS		· · · · · · · · · · · · · · · · · · ·	·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P John Madieros 5037 N. Saddle Dr. Beverly Hills, Florida 34465			U00000245033 02/28/05-80008-017 61.3		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Coral Anderson 10073 Domingo Dr. Brooksville, Florida 34601			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Suzanne Madieros 5037 N. Saddle Dr. Beverly Hills, Florida 34465					
TITLE NAME STREET ADDRESS CITY-SI-ZIP	T Patricia Jaimes 2907 Cedar Trace Tarpon Springs, Florida 34689			IN THIS SPACE		
EITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jeannine Coats 2210 E. Shales CT. Hemando, Florida 34442					
TITLE NAME STREET ADDRESS CITY: ST-ZIP	D Marj Quackenbush 1501 Keats St. Inverness, Florida 34450					

12. I hereby certify that the information supplied with this filling 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.