2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008
Secretary of State

DOCUMENT# 760060

Entity Name: GREATER ORANGE PARK DOG CLUB, INC.

Current Principal Place of Business:

13 ROBIN RD
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

13 ROBIN RD
ORANGE PARK, FL 32073 US

New Mailing Address:

FEI Number: 59-2125186 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FILZEN, LYDIA
13 ROBIN RD
ORANGE PARK, FL 32073 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:	SD	( ) Delete
Name:	VON POHLMAN, ZELL SD	
Address:	3792 BRAMBLE RD	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:	TD	( ) Delete
Name:	FILZEN, LYDIA	
Address:	13 ROBIN RD	
City-St-Zip:	JACKSONVILLE, FL 32258	
Title:	PD	( ) Delete
Name:	DUFFEY, DARLA	
Address:	5204 BEIGE ST	
City-St-Zip:	JACKSONVILLE, FL 32258	
Title:	D	( ) Delete
Name:	MARTINEZ, PAT D	
Address:	9890 WESBOURNE CT.	
City-St-Zip:	JACKSONVILLE, FL	
Title:	D	( ) Delete
Name:	ROSS, KELLY D	
Address:	1912 BRECKENRIDGE BLVD.	
City-St-Zip:	MIDDLEBURG, FL 32068	
Title:	VPD	( ) Delete
Name:	EMERY, ACE VPD	
Address:	P O BOX 1992	
City-St-Zip:	MIDDLEBURG, FL 32250	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	SD	(X) Change ( ) Addition
Name:	BASSINGTHWAIGHTE, CAROLYN SD	
Address:	1440 FRUIT COVE RD N	
City-St-Zip:	JACKSONVILLE, FL 32259	
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:	D	(X) Change ( ) Addition
Name:	WRIGHT, SUZANNE D	
Address:	1638 ANNE DR	
City-St-Zip:	MIDDLEBURG, FL 32068	
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: LYDIA FILZEN TD 03/17/2008

Electronic Signature of Signing Officer or Director — Date