

415-97 B 4685 C  
FILE NOW: FILING FEE IS \$61.25

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Apr 15 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 762846 (4)</b>			
1. Corporation Name <b>TAMPA BAY TERRIER CLUB, INC.</b>			
Principal Place of Business C/O MARSHALL ALFRED P. 3445-A EAST BAY DRIVE LARGO FL 34641 US		Mailing Address C/O MARSHALL ALFRED P. 3445-A EST BAY DRIVE LARGO FL 34641 US	
2. Principal Place of Business 21 <i>90 Raymond A. CONE</i> Suite, Apt., etc. 22 <i>2481 Hickman circle</i> City & State 23 <i>Clearwater, FL</i> Zip 24 <i>34621</i>		2a. Mailing Address 25 <i>90 Raymond A. CONE</i> Suite, Apt., etc. 26 <i>2481 Hickman circle</i> City & State 27 <i>Clearwater, FL</i> Zip 28 <i>34621</i> County 29 <i>Pinellas</i>	
3. Date Incorporated or Qualified <b>04/13/1982</b>		3a. Date of Last Report <b>03/25/1996</b>	
4. FEI Number <b>59-2205967</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent <del>MARSHALL ALFRED P. 3445-A EAST BAY DRIVE LARGO FL 34641</del> <i>Raymond A. CONE 2481 Hickman circle Clearwater, FL 34621</i>		10. Name and Address of New Registered Agent 81 Name <i>Raymond A. CONE</i> 82 Street Address (P.O. Box Number is Not Acceptable) <i>2481 Hickman Circle</i> 83 84 City <i>Clearwater</i> FL 85 Zip Code <i>34621</i>	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE <i>Raymond A. Cone (Treasurer)</i> DATE <i>3/20/97</i>			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPEZ, UNDA 709 W RIVER HEIGHTS TAMPA FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>Linda Lopez 709 W. River Heights Tampa, FL 33603</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARSHALL, ALFRED P. 3445-A EAST BAY DRIVE LARGO FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>Raymond A. CONE 2481 Hickman circle Clearwater, FL 34621</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, ANTHONY 709 W RIVER HEIGHTS TAMPA FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Corresponding Secretary Samantha Williams 117 DUNBRIDGE DRIVE Palm Harbor, FL 33684</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LORANO, MARJORIE 1445 COREY WAY S SOUTH PASADENA FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>Marjorie Lorand 1445 Corey way S. South Pasadena, FL 33707</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SUNDBLOM, BETTY 9714 53RD AVENUE NORTH ST. PETERSBURG FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Lois Bolding 1212 Lake Charles Circle Lutz, FL 33549</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONE, LYNN 2554M STONEY BROOK LANE CLEARWATER FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>Denzel Spencer 1976 Levine Lane Clearwater, FL 34621</i>

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)