2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762846

FILED Mar 15, 2005 Secretary of State

Entity Name: TAMPA BAY TERRIER CLUB, INC.

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

C/O LINDA LOPEZ 709 W. RIVER HEIGHTS TAMPA, FL 33603

Current Mailing Address: New Mailing Address:

C/O LINDA LOPEZ C/O LINDA LOPEZ 709 W. RIVER HEIGHTS 709 W. RIVER HEIGHTS AVE TAMPA, FL 33603 TAMPA, FL 33603

FEI Number: 59-2205967 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LOPEZ, LINDA LOPEZ, LINDA 709 W. RIVER HEIGHTS 709 W. RIVER HEIGHTS AVE TAMPA, FL 33603 TAMPA, FL 33603

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: 03/15/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

(X) Change () Addition () Delete LOPEZ, ANTHONY LOPEZ, ANTHONY Name: Name: 709 W. RIVER HEIGHTS Address: 709 W. RIVER HEIGHTS AVE Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: TAMPA, FL 33603 Title: TD () Delete Title: (X) Change () Addition LOPEZ, LINDA Name: LOPEZ, LINDA Name: Address: 709 W. RIVER HEIGHTS Address: 709 W. RIVER HEIGHTS AVE City-St-Zip: TAMPA, FL 33603 City-St-Zip: TAMPA, FL 33603 Title: SD () Delete Title: () Change () Addition ADAMS, CONNI Name: Name: Address: 2723 KALA LN Address:

City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: Title: SD () Delete Title: () Change () Addition

Name: AXELROD, ELLEN Name: 606 KNOLLWOOD DR Address: Address: City-St-Zip: LARGO, FL 33770 City-St-Zip:

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

LORAND, MARJ Name: Name: 1445 COREY WAY S Address: Address: City-St-Zip: S. PASADENA, FL 33707 City-St-Zip:

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

BUCHANAN, MARSHA Name: Name: Address: 711 CORAL VINE LANE Address: TAMPA, FL 33619 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDA LOPEZ TD 03/15/2005