## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#762846** 

Entity Name: TAMPA BAY TERRIER CLUB, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
C/O LINDA 709 W. RIV TAMPA, FI	VER HEIGHTS			
Current Mailing Address:		New Maili	New Mailing Address:	
C/O LINDA 709 W. RIV TAMPA, FI	VER HEIGHTS			
FEI Number:	: 59-2205967 FEI Number Applied For ( ) F	El Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
LOPEZ, LII 709 W. RIV TAMPA, FI	VER HEIGHTS			
The above in the State	named entity submits this statement for the purpe of Florida.	ose of changing i	ts registered office or registered agent, or both,	
SIGNATUR				
	Electronic Signature of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete WILLIAMSA, SANDRA 1305 NEW YORK AVE DUNEDIN, FL 34698	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition LOPEZ, ANTHONY 709 W. RIVER HEIGHTS TAMPA, FL 33603	
Title: Name: Address: City-St-Zip:	TD () Delete LOPEZ, LINDA 709 W. RIVER HEIGHTS TAMPA, FL 33603	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD ( ) Delete ADAMS, CONNI 2723 KALA LN PLANT CITY, FL 33565	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD ( ) Delete AXELROD, ELLEN 606 KNOLLWOOD DR LARGO, FL 33770	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD ( ) Delete LOPEZ, ANTHONY 709 W. RIVER HEIGHTS TAMPA, FL 33603	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition LORAND, MARJ 1445 COREY WAY S S. PASADENA, FL 33707	
Title: Name: Address: City-St-Zip:	D ( ) Delete SCHRIMPF, KATHLEEN 5317 LAS FLORES VIA NEW PORT RICHEY, FL 34655	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BOLDING LOIS, KATHLEEN 1212 LAKE CHARLES CR LUTZ, FL 33549	

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: ANTHONY LOPEZ PD 04/30/2003