2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 09, 2003 8:00 am Secretary of State

1. EntigNan	MENT # 765976 ASTERN GUIDE DOGS, INC					04-18-2003 90	437 045 **	**70.00	
Principal Place of Business Mailing Address					-				
4210 77TH STREET, EAST PALMETTO FL 34221		4210 77TH STREET. EAST PALMETTO FL 34221							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59	-2252352	No	plied For Applicable	
Zip Country		Zip Cou		ntry	5. Certificate of Status Desired S8.75 Addi			,	
	6. Name and Address of Curr	t Registered Agent			7. Name and Addr	ess of New Registered	Agent		l
				Name					
WALTERS, CLIFFORD L BLALOCK, LANDERS, ET AL, P.A.				Street Address (P.O. Box Number is Not Acceptable)					
802 11T	TH ST. WEST						1 7: 0 d		Í
	NTON FL 34205			City	FL Zip Code				ľ
8. The above the obligation of	ve named entity submits this statement atlons of registered agent. Signatury speed or printed name of registered at	elsto			uired when reinstating)	9 DATE	11/03		5
ħ,	FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Make Check Payable to Florida Department of State			
<u> </u>	<u> </u>	DIOCOTODO	11.		ADDITIONS/CHANGE	S TO OFFICERS AND I	DIRECTORS IN	10	_
10.	OFFICERS AND	Delete	TITL		7,000,000		☐ Change	Addition	8
	SHERMAN, ROBERT 114 30TH ST. W.		_	E EET ADDRESS -ST-ZIP					F037 (10/02
TITLE NAME	P BRADENTON FL TD- WOYLE, WILLIAM D-		TITL	E			☐ Change	Addition	CR2
STREET ADDRES				FET ADORESS -ST-ZIP					
CIT-SI-ZIF	EDCO-	Delete	m	E =	- <u> </u>		Change	[Addition_	1
NAME	SERGEANT, MIKE	•	NAN	I .					
STREET ADDRES				EET ADDRESS 7-ST-ZIP					
CITY-ST-ZIP	PALMETTO FL	The Paris	- m				☐ Change	☐ Addition	1
TITLE	PD- OOWAN, JACQUELYN P-	□ Delete	NAS	l l					
NAME STREET ADDRES	THE PARTY IN PURIOUS FIRM	7		EET ADDRESS		•			1
CITY-ST-ZIP	RRADENTON FL 34203-	_	CIT	r-ST-ZIP					1
TITLE	TREADUR	. T Delete	m	1			☐ Change	Addition	1
NAME	Michael Gall	veei, Jr. Deele nore TERRACI n FL 3420	NAI o						1
STREET ADDRES	ss (1942, Woodr	MORE LEXILATE	27 27	EET ADORESS Y-ST-ZIP					1
CITY-ST-ZIP	1 4 11772	$\omega L L = 24 \text{ M}_{\odot}$	/~■ ⁽⁽⁾						-4

12. Thereby 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 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

941 729-5665

☐ Change