

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 20, 2005
Secretary of State**

DOCUMENT# 767992

Entity Name: GULFCOAST SCHUTZHUND CLUB, INC.

Current Principal Place of Business:

13454 HAYS RD
SPRING HILL, FL 34610 US

New Principal Place of Business:

Current Mailing Address:

13454 HAYS RD
SPRING HILL, FL 34610 US

New Mailing Address:

FEI Number: 59-2387514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEFF, CHRISTINE K
13454 HAYS RD
SPRING HILL, FL 34610 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: PD () Delete
Name: NEFF, CHRISTINE
Address: 13454 HAYS ROAD
City-St-Zip: SPRING HILL, FL 34610 US

Title: VSD () Delete
Name: JERRY, GARBER M
Address: P.O. BOX N/A
City-St-Zip: CITRA, FL 32113 US

Title: TD () Delete
Name: NEFF, ERIC E
Address: 13454 HAYS RD
City-St-Zip: SPRING HILL, FL 34610 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SEC () Change (X) Addition
Name: QUINN, STEVE
Address: 37337 ORANGE BLOSSOM LANE
City-St-Zip: DADE CITY, FL 33525 US

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: CHRISTINE NEFF

PD

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date