

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769487

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** DOG OBEDIENCE CLUB OF LEE COUNTY, INC.

**Current Principal Place of Business:**

3280 MARION STREET  
FT. MYERS, FL 33916 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 60821  
FT. MYERS, FL 33906 US

**New Mailing Address:**

**FEI Number:** 59-2349750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COVYEAU, DEBRA  
7981 DENI DR NE  
NORTH FORT MYERS, FL 33917 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: WARING, JOSEPH R  
Address: 3434 S.W. 5TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

Title: CS ( ) Delete  
Name: DAVIS, SUE E  
Address: 20400 WILLIAMS DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: TD ( ) Delete  
Name: COVYEAU, DEBRA J  
Address: 7981 DENI DR NE  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: S ( ) Delete  
Name: KOBEL, GENTRY  
Address: 19621 N. TAMiami TRAIL #35  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VD ( ) Delete  
Name: STUBLER, RUTH  
Address: 3936 EDGEWOOD AVE  
City-St-Zip: FORT MYERS, FL 33916

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: BELL, TERRI  
Address: 15630 BRIAR PATCH LANE  
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TERRI BELL

VD

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date