

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 09, 2009
Secretary of State

DOCUMENT# 770285

Entity Name: DOBERMAN PINSCHER CLUB OF FLORIDA, INC.**Current Principal Place of Business:**9300 SW 60 COURT
PINECREST, FL 33156 US**New Principal Place of Business:****Current Mailing Address:**9300 SW 60 COURT
PINECREST, FL 33156 US**New Mailing Address:****FEI Number:** 94-3015138**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BAIKOW, DAVID
9300 SW 60 COURT
PINECREST, FL 33156 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:** PRES () Delete
Name: BAIKOW, DAVID
Address: 9300 SW 60 COURT
City-St-Zip: PINECREST, FL 33156**Title:** VP () Delete
Name: ROCHE, LYNN
Address: 13313 BRYAN RD
City-St-Zip: LOXAHATCHEE, FL 33470**Title:** RS () Delete
Name: BAIKOW, CAROLE
Address: 9300 SW 60 COURT
City-St-Zip: PINECREST, FL 33156**Title:** TREA () Delete
Name: VEERKAMP, MARJORIE
Address: 741 SW 71 AVE
City-St-Zip: PEMBROKE PINES, FL 33023**Title:** BD () Delete
Name: KLEIN, MARY
Address: 2871 FAIRGREEN DR
City-St-Zip: MIAMI BEACH, FL 33140**Title:** BD () Delete
Name: BLACKBURN, DONNA
Address: 19810 NE 12 AVENUE
City-St-Zip: N. MIAMI BEACH, FL 33179**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP (X) Change () Addition
Name: BLACKBURN, DONNA
Address: 19810 NE 12 AVENUE
City-St-Zip: N MIAMI BEACH, FL 33179**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TREA (X) Change () Addition
Name: ROCHE, LYNN
Address: 13313 BRYAN RD
City-St-Zip: LOXAHATCHEE GROVES, FL 33470**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID BAIKOW

PRES

12/09/2009

Electronic Signature of Signing Officer or Director

Date