

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000361

Entity Name: MILLENNIUM DOG PARK, INC.

FILED  
Apr 21, 2004  
Secretary of State

**Current Principal Place of Business:**

4260 S.E. 53RD AVE  
OCALA, FL 34480

**New Principal Place of Business:**

**Current Mailing Address:**

4260 S.E. 53RD AVE  
OCALA, FL 34480

**New Mailing Address:**

FEI Number: 59-3656476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOWLES, LETTY M  
4260 S.E. 53RD AVE  
OCALA, FL 34480 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: D ( ) Delete  
Name: TOWLES, LETTY M  
Address: 2862 NORTH EAST 32ND PLACE  
City-St-Zip: Ocala, FL 34479

Title: D ( ) Delete  
Name: HORNBY, LORI  
Address: 550 NORTH EAST 25TH AVE  
City-St-Zip: Ocala, FL 33470

Title: D ( ) Delete  
Name: ROSENTHAL, SUE E  
Address: 11397 SOUTHEAST 92ND COURT  
City-St-Zip: BELLEVIEW, FL 34420

Title: D ( ) Delete  
Name: MCBEE, PATRICIA  
Address: 17370 SOUTHEAST 35TH LANE  
City-St-Zip: Ockalawaha, FL 32179

Title: D ( ) Delete  
Name: SAMPLE, LINDA  
Address: 6540 NW 135TH AVE.  
City-St-Zip: MORRISTON, FL 32668

Title: D ( ) Delete  
Name: SNYDER, CHRIS  
Address: 721 NORTH EAST 45TH PLACE  
City-St-Zip: Ocala, FL 34479

**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: ( ) 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 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: LINDA SAMP;E

D

04/21/2004

Electronic Signature of Signing Officer or Director

Date