

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004004

FILED  
Feb 14, 2011  
Secretary of State

**Entity Name:** FLORIDA GREAT PYRENEES CLUB, INC.

**Current Principal Place of Business:**

509 GEORGETOWN PLACE  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

509 GEORGETOWN PLACE  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

**FEI Number:** 59-3653512

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILLIAMS, BONNIE  
509 GEORGETOWN PLACE  
SAFETY HARBOR, FL 34695 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: P  
Name: MOORE, CAROLYN  
Address: 19083 REDBIRD LANE  
City-St-Zip: LITHIA, FL 33547

Title: VP  
Name: SANDLAK, TERRY  
Address: 5715 FRONTIER DR  
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: S  
Name: ROYAL, MOLLY  
Address: 4127 YELLOWWOOD DR  
City-St-Zip: VALRICO, FL 33594

Title: T  
Name: WILLIAMS, BONNIE  
Address: 509 GEORGETOWN PLACE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: RC  
Name: STEPHANICK, TERRY  
Address: 5715 FRONTIER DR  
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D  
Name: HOWARD, MARK  
Address: 4611 COUNTRY HILLS CT N  
City-St-Zip: PLANT CITY, FL 33566

I hereby 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 all other like empowered.

SIGNATURE: BONNIE WILLIAMS

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02/14/2011

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

\_\_\_\_\_  
Date