


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000006121
 1. Entity Name
 DOG AGILITY COMPETITION OF FLORIDA, INC.



Principal Place of Business
 7811 - 47TH ST N
 PINELLAS PARK, FL 33781

Mailing Address
 7811 - 47TH ST N
 PINELLAS PARK, FL 33781



01202006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
 59-3709722

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 KILLEEN, JOANNE F
 7811 - 47TH ST N
 PINELLAS PARK, FL 33781

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P REED, RANDY 1142 NE 91ST STREET MIAMI, FL 331383452
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP COURTNEY, JOHN 1820 MICHELS DRIVE NE PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HALMAN, YVONNE 1424 DANN STREET ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T YORK, JOHN 4201 WESTGATE AVE #5-A WEST PALM BEACH, FL 33409
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HANNA, TRACY 8875 SW 120TH TERR MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000396357
 01/30/06-80008-002 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John A York 1/20/06 561-686-3575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #