

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006121

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: DOG AGILITY COMPETITION OF FLORIDA, INC.

**Current Principal Place of Business:**

7811 - 47TH ST N  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

7811 - 47TH ST N  
PINELLAS PARK, FL 33781

**New Mailing Address:**

FEI Number: 59-3709722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KILLEEN, JOANNE F  
7811 - 47TH ST N  
PINELLAS PARK, FL 33781 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 ( ) Delete  
Name: MACBROOM, CLIFF  
Address: 11200 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33330

Title: BD ( ) Delete  
Name: KILLEEN, JOANNE  
Address: 7811 - 47TH ST N  
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD ( ) Delete  
Name: MANN, PATRICIA  
Address: 2236 NOTTINGHAM ROAD  
City-St-Zip: LAKELAND, FL 33803

Title: T ( ) Delete  
Name: MACVICAR, VICTORIA  
Address: 15648 MAHONEY DRIVE  
City-St-Zip: SPRING HILL, FL 34610

Title: VP ( ) Delete  
Name: HANNA, TRACY  
Address: 8875 SW 129TH TERR  
City-St-Zip: MIAMI, FL 33176

**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: VP (X) Change ( ) Addition  
Name: HAYES, KELLI  
Address: 3137 DIANA DR  
City-St-Zip: ZEPHYRHILLS, FL 33541

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: VICTORIA MACVICAR

T

04/24/2008

Electronic Signature of Signing Officer or Director

Date