

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000283

FILED
Aug 02, 2005
Secretary of State

Entity Name: INTERNATIONAL ASSOCIATION OF CANINE PROFESSIONALS, INC.

Current Principal Place of Business:

15549 VINOLA DR.
MONTVERDE, FL 34756

New Principal Place of Business:

Current Mailing Address:

15549 VINOLA DR.
MONTVERDE, FL 34756

New Mailing Address:

FEI Number: 59-3688227 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEELEY, MARTIN D
15549 VINOLA DR.
MONTVERDE, FL 34756 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: EDP () Delete
Name: DEELEY, MARTIN D
Address: 15549 VINOLA DR.
City-St-Zip: MONTVERDE, FL 34756

Title: DV () Delete
Name: STULL, JAY
Address: 1443 FARMSIDE DR.
City-St-Zip: FORISTELL, MO 63348

Title: DT () Delete
Name: TRICHTER, PAT
Address: 15549 VINOLA DRIVE
City-St-Zip: MONTVERDE, FL 34756

Title: D () Delete
Name: BERGMAN, VIVIAN
Address: 3 HERSHEY RD
City-St-Zip: WAYNE, NJ 07470

Title: DS () Delete
Name: MACFARLANE, ROBIN
Address: 1619 HWY 11
City-St-Zip: HAZEL GREEN, WI 53811

Title: D () Delete
Name: DOUAN, CYNDY
Address: 151 PRATER RD
City-St-Zip: KINGSTON, GA 301451828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: EDP (X) Change () Addition
Name: DEELEY, MARTIN D
Address: 15549 VINOLA DR.
City-St-Zip: MONTVERDE, FL 34756 US

Title: DV (X) Change () Addition
Name: DOUAN, CYNDY
Address: 151 PRATER ROAD
City-St-Zip: KINGSTON, GA 30145 US

Title: DT (X) Change () Addition
Name: TRICHTER, PAT
Address: 15549 VINOLA DRIVE
City-St-Zip: MONTVERDE, FL 34756 US

Title: D (X) Change () Addition
Name: BUTLER, KRIS
Address: 12202 BUCKSKIN PASS
City-St-Zip: NORMAN, OK 73026 US

Title: D (X) Change () Addition
Name: MACFARLANE, ROBIN
Address: 1619 HWY 11
City-St-Zip: HAZEL GREEN, WI 53811 US

Title: D (X) Change () Addition
Name: MACKIN, CHAD
Address: 2782 FOREST POINT
City-St-Zip: LEAGUE CITY, TX 77573 US

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: PAT TRICHTER

D,T

08/02/2005

Electronic Signature of Signing Officer or Director

Date