

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002940

FILED
Sep 03, 2003
Secretary of State

Entity Name: FEDERAL WOLF-DOG RESCUE, INC.

Current Principal Place of Business:

7949 ULMERTON RD
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

7949 ULMERTON RD
LARGO, FL 33771

New Mailing Address:

FEI Number: 03-0379539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BEDNAR, DAWN
7949 ULMERTON RD
LARGO, FL 33771

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: BEDNAR, DAWN
Address: 7957 ABERDEEN CIRCLE
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: WALTON, JIM
Address: 4700 48 ST NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: D () Delete
Name: HORN, GABRIEL
Address: 4419 PORPOISE DR SE
City-St-Zip: ST PETERSBURG, FL 33705

Title: D () Delete
Name: HAYES, CEANN
Address: 1862 SHORE ACRES BLVD
City-St-Zip: ST PETERSBURG, FL 33704

Title: D () Delete
Name: BARRON, BONNIE
Address: 7208 41 CT EAST
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: MAYNARD, KENT DR.
Address: 11720 US 19 NORTH, STE 10
City-St-Zip: PORT RICHEY, FL 34668

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ROBERTS, LUREE
Address: 661TAMARIND LANE
City-St-Zip: OLDSMAR, FL 34677

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KROUT, AMY
Address: 4419 PORPOISE DR SE
City-St-Zip: ST PETERSBURG, FL 33705

Title: S/D (X) Change () Addition
Name: RITCH, SHANE
Address: PO BOX 9127
City-St-Zip: LARGO, FL 33773

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: DAWN BEDNAR

D

09/03/2003

Electronic Signature of Signing Officer or Director

Date

JOANNE POTTS/TREASURER
3901 W SAN RAFAEL ST
TAMPA, FL 33629