

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8/25/2003-90096-005-\$61.25-\$61.25

DOCUMENT # N02000004854

1. Entity Name

THE FRIENDS OF WELLINGTON DOG PARK INC.



03 OCT -8 AM 8:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
13860-31 WELLINGTON TRACE
WELLINGTON FL 33414

Mailing Address
13860-31 WELLINGTON TRACE
WELLINGTON FL 33414

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT
CHECK HERE IF MAKING CHANGES

Fee Number

04-3701748

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PINKWASSER, MARC DVM
13860-31 WELLINGTON TRACE
WELLINGTON FL 33414

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/8/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP
NAME PINKWASSER, MARC
STREET ADDRESS 13860-31 WELLINGTON TRACE
CITY-ST-ZIP WELLINGTON FL 33414

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DV
NAME KRAKOW, ELLIOTT
STREET ADDRESS 13860-31 WELLINGTON TRACE
CITY-ST-ZIP WELLINGTON FL 33414

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DS
NAME MADES, JANE
STREET ADDRESS 13860-31 WELLINGTON TRACE
CITY-ST-ZIP WELLINGTON FL 33414

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DS
NAME LEVY, LOIS
STREET ADDRESS 13860-31 WELLINGTON TRACE
CITY-ST-ZIP WELLINGTON FL 33414

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DT
NAME BRYANT, ELKE
STREET ADDRESS 13860-31 WELLINGTON TRACE
CITY-ST-ZIP WELLINGTON FL 33414

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/03 (56)784-7387

Date

Daytime Phone #

CR2E037 (10/02)