## 2003 NOT-FOR-PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0200005615



**FILED** May 08, 2003 8:00 am § Secretary of State

GATOR C	THAPTER - DOVE SPORTSM/	AN'S SOCIETY, INC.		05	-08-2003 90155 025 ****61.	25
Principal Plac C/O 4411 NW GAINESVILLE		Mailing Address C/O 4411 NW 18TH PLACE GAINESVILLE FL 32605				
2. Principal I	Place of Business	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number Applied For Not Applicable		
Zip	Country	Zip	Country	5. Certificate of Sta	tus Desired	
	6. Name and Address of Current	Registered Agent		7. Name and Addre	ess of New Registered Agent	
			Name			-
DELANEY, PHILIP A 4041-B NW 37TH PLACE		: Street Address (P.O. Box Number is Not Acceptable)				
GAINESVILLE FL 32606				i		
	3		City		FL Zip Coo	ie
	e named entity submits this statement for	or the purpose of changing its	registered office or regis	stered agent, or both, in the	ne State of Florida. I am familiar with,	and accept
trie obliga	itions of registered agent.		MART	\	/ /	
SIGNATURE Standards, typed or printed name of registered agent and title if applicable (NOTE regulator Agent standard equipment when reinstating)  DATE						
	organists, types of printed hard or registered against	(10.2				
		•		j		- 1
	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Ca	paign Financing ontribution.	\$5.00 May Be Added to Fees	Make Check Payable Florida Department of	
10.	OFFICERS AND DI	Trust Fund Co	ontribution.	Added to Fees	Florida Department of	State
10. TITLE	OFFICERS AND DI	Trust Fund Co	ontribution.   11.  IIILE	Added to Fees	Florida Department of	State
10.	OFFICERS AND DI	Trust Fund Co	ontribution.	Added to Fees	Florida Department of	State
10. TITLE NAME	OFFICERS AND DI D OEHMIG, ED	Trust Fund Co	11.   JITLE   NAME	Added to Fees	Florida Department of	State
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DI D OEHMIG, ED 4411 NW 18TH PLACE GAINESVILLE FL 32605 D	Trust Fund Co	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Florida Department of	State
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d accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if the file empowered. indicated on this report or sur of the corporation or the recei changed, or on an attachmen