

CHARLES E. THOMSON
ATTORNEY AT LAW
5191 PARK BLVD., SUITE 5 & 6
PINELLAS PARK, FL 33565

N04095

Secretary of State
Division of Corporations
Corporate Records Bureau
P.O. Box 6327
Tallahassee, Florida 32301

Jun 27 1984

006 3743 6/25/84 15.00
006 3743 6/25/84 15.00
006 3743 6/25/84 30.00

RE: Char Bar Po, Inc. a Florida Corporation &
Dog Obedience Clubs of Florida, a not for profit corporation

Dear Sirs:

000270414660

Enclosed please find articles of incorporation for both of the
above corporations and checks for \$63.00 and \$30.00 respectively.

Please file.

Thank you in advance for your cooperation.

Very truly yours,

Charles E. Thomson
Charles E. Thomson, Esq.

sent 20.00
Due - 3.00

SET/rt

W07884

6/25/84

5

7-9

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11-12

13-14

15-16

17-18

19-20

21-22

23-24

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99-100

3, 23, 26, 65, 57, 46, 144

C. TAX _____

FILING _____

R. AGENT FEE _____

C. COPY _____

TOTAL _____

N. BANK _____

BALANCE DUE _____

REFUND _____

N04095

CHARLES E. THOMSON
ATTORNEY AT LAW
5191 PARK BLVD., SUITE 5 & 6
PINELLAS PARK, FL 33565

July 5, 1984

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32301

RE: Russ Brown's Rent-A-Chef, Inc. &
Dog Obedience Clubs of Florida, Inc.

To Whom It May Concern:

Enclosed please find my check in the amount of \$6.00.
Please reserve the name of Russ Brown's Rent-A-Chef, Inc. for my
clients, Russell L. Brown and Joan T. Brown of 7748 82nd Avenue N.,
St. Petersburg, Florida 33709.

Also, please find my check in the amount of \$3.00 and copy
of cover letter that your office submitted to me on Dog Obedience
Clubs of Florida, Inc. You already have \$30.00.

Thank you in advance for your cooperation.

Very truly yours,

Charles E. Thomson
Charles E. Thomson, Esq.

CET/rt



FLORIDA DEPARTMENT OF STATE

George Firestone
Secretary of State

D.W. McKinnon, Director
Division of Corporations
(904) 488-9636

Mrs. Nettie Sims, Chief
Bureau of Corporate Records
(904) 488-9383

June 28, 1984

Charles E. Thomson, Esq.
5191 Park Blvd., Suite 5 & 6
Pinellas Park, FL 33565

SUBJECT: DOG OBEDIENCE CLUBS OF FLORIDA
Reference: W07884

Dear Mr. Thomson:

We have received your document for the above corporation and your check(s) totaling \$30.00. However, the document has not been filed and is being returned for the following:

The fees are \$30 for Filing Fee, \$3 for the Registered Agent Fee, and \$5 for each Certified Copy (optional).

A balance of \$3 is due for the Registered Agent Fee.

The corporate name of the corporation must contain the required corporate suffix. This suffix must be either Corporation, Incorporated or an abbreviation of either word. Chapter 617.003, (1) (a) Florida Statutes prohibits the use of the word Company or an abbreviation of this word as the suffix of a non-profit corporation.

You must list at least (3) directors. Please be sure you provide addresses for all.

Article V lists trustees and Article VI lists one Director. The terms trustee and director may be interchangeable. However, a corporation usually will not have both trustees and directors. Perhaps you meant for Article VI to list Mr. Wissler as an incorporator. Also if you wish a certified copy, be returned to you after filing, send an additional \$5.00 for that certification fee.

If you have further questions concerning the filing of your document, please call (904) 488-9005.

Sincerely,

Karen Gibson
Document Examiner
Foreign Section

KG: krg Division of Corporations • P.O. Box 6327 • Tallahassee, Florida 32314

FLORIDA State of the Arts

No 4095

ARTICLES OF INCORPORATION

FOR

DOG OBEDIENCE CLUBS OF FLORIDA, INC.

A Florida Not for Profit Corporation

I.

The name of this corporation is DOG OBEDIENCE CLUBS OF FLORIDA, INC.
a Florida Not for Profit Corporation.

II.

This is a nonprofit corporation, organized solely for general
purposes pursuant to the Florida Corporations Not for Profit Law set forth
in Section 617 of the Florida Statutes.

III.

The term of existence of the corporation is perpetual.

IV.

The specific and primary purposes for which this corporation is
formed are:

- (a) To promote dog obedience training throughout Florida;
- (b) To promote cooperation of all member obedience organizations; and
- (c) To promote and encourage sportsmanlike competition at all obedience matches and trials.

V.

There shall be three types of memberships and their qualifications for
membership and the manner of their admission shall be described and regulated
in the by-laws to this corporation.

VI.

The street address of this corporation's initial registered office
and the name of its initial registered agent is:

MR. KARL J. WISSLER 6680 99th Avenue North
Pinellas Park, Florida 33565

The powers of this corporation shall be exercised, its properties controlled, and its affairs conducted by a Board of Trustees. The Trustees named herein as the first Board of Trustees shall hold office until the first meeting of members at which time an election of Trustees shall be held.

MR. KARL J. WISSLER

6680 99th Avenue North
Pinellas Park, FL 33565

MR. PETER RAUTENSTRAUCH

1896 Tuscowilla Road
Oviedo, FL 32765

MS. JOAN ASMUSSEN

Post Office Box 46
Orlando, FL 32802

MS. JILL KLEIN

4326 11th Avenue North
St. Petersburg, FL 33713

FILED
1984 JUN 10 AM 8 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This corporation shall have one (1) incorporator and his name and address is:

MR. KARL J. WISSLER

6680 99th Avenue North
Pinellas Park, FL 33565

These articles of incorporation are hereby acknowledged and executed by the undersigned on this the 24th day of June, 1984.

WITNESSES:

Virginia J. Coughlin

Charles E. Thomson

Karl J. Wissler
MR. KARL J. WISSLER

STATE OF FLORIDA)
)ss
COUNTY OF PINELLAS)

MR. KARL J. WISSLER personally appeared before me, the undersigned authority, and after having been duly cautioned and sworn stated the above articles of incorporation are true to the best of his knowledge and belief.

Charles E. Thomson
NOTARY PUBLIC
MY COMMISSION EXPIRES:

RESIDENT AGENT FOR SERVICE
OF PROCESS

MR. KARL J. WISSLER, hereby agrees and acknowledges that he will act as the resident agent for service of legal process upon Dog Obedience Clubs of Florida, Inc., a Florida Not for Profit Corporation, and his address for the service of said process is: 6680 99th Avenue North, Pinellas Park, Florida 33565.

Karl J. Wissler
MR. KARL J. WISSLER

STATE OF FLORIDA)
)ss
COUNTY OF PINELLAS)

Sworn to and subscribed before me this 21st day of June, 1984.

Rosalee Stone
NOTARY PUBLIC
MY COMMISSION EXPIRES:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES NOV 13 1984
BONDED THRU GENERAL INSURANCE LTD

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1985



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

NO4095 &
DOG OBEDIENCE CLUBS OF FLORIDA, INC.
C/O MR. KARL J. WISSLER
6680 99TH AVENUE NORTH
PINELLAS PARK, FL 33565

If above address is incorrect in any way, enter the correct address
in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number, Alone or Not Sufficient

Street Address

P.O. Box No.

City

State

Zip Code

3. Date of Incorporation or Qualified
in this State

07/10/1984

4. Federal Employer
Identification Number (FEIN)

APPLIED FOR

5. Date of
Last Report

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1. WISSLER, MR. KARL J.	P/D	6680 99TH AVENUE NORTH	PINELLAS PARK, FL
2. RAUTENSTRAUCH, MR. PETER	V/D	1476 TUSCAWILLA ROAD	OVIEDO, FL
3. SHUSSEN, MS. JOAN	D	PO BOX 46	ORLANDO, FL
4. SIMS, MS. ANNE	S/D	2610 WATROUS AVE	TAMPA, FL
5. KLEIN, MS. JILL	BT/D	4326 11TH AVENUE NORTH	ST. PETERSBURG, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

WISSLER, MR. KARL J. 6680 99TH AVENUE NORTH PINELLAS PARK, FL 33565	Name Street Address (Do NOT Use P.O. Number) City, State and Zip Code
---	---

9. Pursuant to the provisions of Sections 807.034 and 807.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.
Such change was authorized by resolution duly adopted by its board of directors on:

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 807.325 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6).

Signature Karl J. Wissler	Date JUNE 17, 1985
Typed Name of Signing Officer KARL J. WISSLER	Telephone Number (813) 544-2105
Title PRESIDENT	

11. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED

☐

\$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1986



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient	
ND4095 8 DOG OBEDIENCE CLUBS OF FLORIDA, INC. C/O MR. KARL J. WISSLER 6680 99TH AVENUE NORTH PINELLAS PARK, FL 33565		Street Address 21 P.O. Box No. 22 City and State 23 Zip Code 24	

3. Date of Report 07/10/1984	4. Federal Employer Identification Number (EIN) APPLIED FOR	5. Date of Last Report 07/02/1985
------------------------------	---	-----------------------------------

1	2	3	4	5
Name	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
WISSLER, MR. KARL J.	P/D	6680 99TH AVENUE NORTH	PINELLAS PARK, FL	
REINSTRUCH, MR. PETER	V/D	1496 TUSCUMILLA ROAD	OVIEDO, FL	
SIMP, MS. ANNE	S/D	2610 WATROUS AVE.	TAMPA, FL	
KLEIN, MS. JILL	T/D	4326 11TH AVENUE NORTH	ST. PETERSBURG, FL	
LAMOREAUX, MS. DIANE	V/D	1223 SUWANNEE ROAD	DAYTONA BEACH, FL	
KREJCI, STEVE	T/D	2823 TRENTWOOD BLVD.	ORLANDO, FL	

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent		8 Name and Address of New Registered Agent	
WISSLER, MR. KARL J. 6680 99TH AVENUE NORTH PINELLAS PARK, FL 33565		Name 81 Street Address (Do NOT Use P.O. Box Number) 82 City and State 83 FL. Zip Code 84	

9 Pursuant to the provisions of Sections 607.04 and 607.05, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____
I hereby accept the appointment of a registered agent, I am familiar with, and accept the obligations of Section 607.325 F.S.
SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10 Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 1)

Signature	Date
KARL J. WISSLER	MAY 28, 86
Title	Telephone Number
PRESIDENT	(813) 544-2105

11. Should you desire a certificate of status check the box.
CERTIFICATE OF STATUS DESIRED ☐
\$5 Additional Fee required for a Certificate of Status

CR2004 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

APPROVED

CORPORATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

1987 APR 21 AM 10:43

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State.

1. Name and Address of Corporation Principal Office

NOV 1985
DOO OBEDIENCE CLUBS OF FLORIDA, INC.
C/O MR. KARL J. WISSLER
6680 99TH AVENUE NORTH
PINELLAS PARK, FL 33565

2. Enter Change of Address of Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address 21

2823 TRENTWOOD BLVD.

P.O. Box No. 12

City and State 73

ORLANDO, FL

Zip Code 74

32812

07-10-1984

Date of Last Report 06/03/1986

Street Address of each Officer and Director

(Do NOT use P.O. Box Number)

City and State

WISSLER, MR. KARL J. P/O 6680 99TH AVENUE NORTH

PINELLAS PARK, FL

ANDREWS, MS. DIANE M/D 1223 SUWANEE RD.

DAYTONA BEACH, FL

MS. ROYALIND V/D 1955 NW 55th Circle Pk

MIAMI, FL

MS. MS. ANNE S/D 2610 MATROUS AVE.

TAMPA, FL

REUCI, STEVE T/D 2823 TRENTWOOD BLVD.

ORLANDO, FL. 32812

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent

Name 81

MR. STEVE KREJCI

Street Address 1 (Do NOT Use P.O. Box Number) 82

2823 TRENTWOOD BLVD.

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

ORLANDO

Zip Code 85

FL.

32812

9. Pursuant to the provisions of Sections 607.014 and 607.017, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the board of directors on Jan. 31, 1987

I hereby accept the appointment, being stated in my familiar oath and accept the obligations of Section 607.325 F.S.

SIGNATURE

Registered Agent Accepts Appointment

Steve Krejci

DATE 4-13-87

\$3.50 additional fee required for Registered Agent changes.

10

See signature restrictions and instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath (Officer signing must be stated in Block 8)

Signature

Date

Typed Name of Signing Officer

Title

Telephone Number

of status check the box

CERTIFICATE OF STATUS DESIRED

☐

\$5 Additional Fee required for a Certificate of Status

CR2004 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

APPROVED

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

MAR -6 1988

RECEIVED
CORPORATION
DIVISION

Read Instructions of Filings on Other Side Before Making Entries.
Filing Fee of \$25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

N04095
DOG OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD.
5650 99TH AVENUE NORTH
ORLANDO, FL. 32812

1. State address is correct. If any entry, enter the current address in item 2. Do not use P.O. Box.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

3. Date of
Last Report

07/10/1984

4. Federal Employer
Identification Number (FEIN)

N/A

5. Date of
Last Report 04/21/1987

6. List Addresses of Each Officer and Director as of December 31, 1987

Name of Officers
and Directors

Street Address of Each
Officer and Director
(Do NOT Use Post Office Box Numbers)

City and State

5

WISLER, MR. KARL J.

P/O

5650 99TH AVENUE NORTH

PINELLAS PARK, FL

WALL, MS. ROSALIND

P/O

19559 NW 55 CIRCLE PL.

MIAMI, FL.

WMS, MS. ANNE

S/O

2610 WATROUS AVE.

TAMPA, FL

KREJCI, STEVE

T/O

2823 TRENTWOOD BLVD.

ORLANDO, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

KREJCI, MR. STEVE
2823 TRENTWOOD BLVD.
ORLANDO, FL. 32812

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

Zip Code 85

FL

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent (or both) in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent I am tendering with and accept the obligations of Section 607.035 F.S.

SIGNATURE _____

(Registered Agent Accepting Appointment)

DATE _____

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

(Officer or Director signing must be listed in Block 6.)

Signature

Steve Krejci

Date

03/ 3/1988

Typed Name of Signing Officer or Director

Steve Krejci

Title

Treasurer

Telephone Number

(305) 855-4301

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

\$5 Additional Fee
required for a
Certificate of Status

ORF0204 (1/88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1989 FEB 14 AM 10:21

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required. - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

N04095 8
DOO OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD.
6680 99TH AVENUE NORTH
ORLANDO, FL. 32812

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Address is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

07/10/1984

5. Date of Last Report 03/08/1988

V/D	WISSLER, MR. KARL J.	6680 99TH AVENUE NORTH	PINELLAS PARK, FL
V/D	MALL, MS. ROSALIND	19559 NW 55 CIRCLE PL.	MIAMI, FL.
S/D	SIMS, MS. ANN	2610 MATROUS AVB.	TAMPA, FL
T/D	KREJCI, STEVE	2823 TRENTWOOD BLVD.	ORLANDO, FL.
S/D	Lukes, MS. Carol	P.O. Box 452	N/A DURANT, FL

REGISTERED AGENT INFORMATION

KREJCI, MR. STEVE
2623 TRENTWOOD BLVD.
ORLANDO, FL. 32812

FL.

9. Pursuant to the provisions of Chapter 607, Florida Statutes, the undersigned, registered agent, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and I am duly qualified to act as such agent. Such changes as may be required by the provisions of Chapter 607, Florida Statutes, shall be made by the undersigned, and I shall be held responsible therefor.

SIGNATURE

Registered Agent Accepting Appointment

DATE

10. If a foreign corporation, indicate the name and jurisdiction of the corporation.

11.

Own signature must be placed under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Name of Which is Indicated on This Report as Required by Chapter 607 FS
I Further Certify That I Understand My Signature On This Report Shall Be a Matter of Public Record As It Must Be Made Under Oath
(Officer or Director signing must be listed on Back of Form)

Signature

Typed Name of Signing Officer or Director

Steve Krejci

Title

Treasurer/Agent

Date

2-4-89

Telephone Number

(407) 855-4301

12. Should you desire a certificate of status () or the box

CERTIFICATE OF STATUS (DESIRE) ☐

\$5 Annual Fee
is required for a
Certificate of Status

DO NOT WRITE



N-041095

DIVISION OF CORPORATIONS
NOTICE OF INCOMPLETE ANNUAL REPORT

MAY 15, 1989

N04095

8

DOG OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD.
6680 99TH AVENUE NORTH
ORLANDO, FL 32812

Your 1989 Corporation Annual Report has been received by the Department of State. Section 357(1)(d), Florida Statutes requires you to include your Federal Employer Identification (FEI) number when filing the annual report. Our computer record indicates this information was not included on the above named corporation's annual report therefore it is considered incomplete. Please insert your FEI number in the lower portion of this notice and return to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

There is no additional fee to include the FEI number in the corporation's permanent record.

DOCUMENT NUMBER N04095 8

CORPORATION NAME DOG OBEDIENCE CLUBS OF FLORIDA, INC.

FEDERAL EMPLOYER IDENTIFICATION NUMBER: _____

FEDERAL EMPLOYER IDENTIFICATION NUMBER APPLIED FOR: YES ☒ NO ☐

IF YOU DO NOT HAVE AN FEI NUMBER, GIVE EXPLANATION: _____

John H. [Signature] (TREASURER)
Signature of Officer or Director

NOTICE: THIS FORM MUST BE COMPLETED AND RETURNED PRIOR TO
JULY 15, 1989 OR THIS CORPORATION'S ANNUAL REPORT WILL BE CONSIDERED
INCOMPLETE AND INACCURATE.

See Attachment
SS-4

Form **SS-4**
(Rev. August 1989)
Department of the Treasury
Internal Revenue Service

Application for Employer Identification Number

(For use by employers and others. Please read the attached instructions before completing this form.) Please type or print clearly.

EIN

OMB No. 1545-0003
Expires 7-31-91

1 Name of applicant (True legal name) (See instructions.)

DOG OBEDIENCE CLUBS OF FLORIDA, INC.

2 Trade name of business, if different from name in line 1

✓

3 Executor, trustee, "care of name"

STEVE J. KREJCI

4a Mailing address (street address) (room, apt., or suite no.)

2823 TRENTWOOD BLVD.

5a Address of business. (See instructions.)

NONE

4b City, state, and ZIP code

ORLANDO, FL. 32812

5b City, state, and ZIP code

NONE

6 County and state where principal business is located

NONE

7 Name of principal officer, grantor, or general partner. (See instructions.)

GEORGE A. BURBURAN (PRESIDENT)

8a Type of entity (Check only one box.) (See instructions.)

☐ Sole proprietor

☐ Personal service corp.

☐ State or local government

☐ National guard

☐ Other nonprofit organization (specify)

☐ Estate

☐ Plan administrator SSN

☐ Other corporation (specify)

☐ Federal government/military

☐ Church or church controlled organization

☐ Trust

☐ Partnership

☐ Farmers' cooperative

Other (specify) ▶

A CLUB COMPRISED OF 35 OBEDIENCE CLUBS IN FLORIDA FOR THE BETTERMENT OF DOGS.

8b If a corporation, give name of foreign country (if applicable) or state in the U.S. where incorporated

Foreign country

State

FLORIDA

9 Reason for applying (Check only one box.)

☐ Started new business

☐ Hired employees

☐ Created a pension plan (specify type) ▶

☐ Banking purpose (specify) ▶

☐ Changed type of organization (specify) ▶

☐ Purchased going business

☐ Created a trust (specify) ▶

☒ Other (specify) ▶ **DIV. OF CORPORATIONS FL REQUESTS ONE**

10 Date business started or acquired (Mo./day/year) (See instructions.)

1975

11 Enter closing month of accounting year. (See instructions.)

DEC.

SEE
ATTACH-
MEN

12 First date wages or annuities were paid or will be paid (Mo./day/year). Note: If applicant is a withholding agent, enter date income will first be paid to nonresident alien. (Mo./day/year)

N/A.

13 Enter highest number of employees expected in the next 12 months. Note: If the applicant does not expect to have any employees during the period, enter "0".

0

Nonagricultural

Agricultural

Household

14 Does the applicant operate more than one place of business?

☐ Yes

☒ No

If "Yes," enter name of business. ▶

15 Principal activity or service (See instructions.) ▶ **STATE COMPETITION OF OBEDIENCE DOGS**

16 Is the principal business activity manufacturing?

☐ Yes

☒ No

If "Yes," principal product and raw material used. ▶

17 To whom are most of the products or services sold? Please check the appropriate box.

☐ Public (retail)

☐ Other (specify) ▶

☐ Business (wholesale)

☒ N/A

18a Has the applicant ever applied for an identification number for this or any other business?

☐ Yes

☒ No

Note: If "Yes," please complete lines 18b and 18c.

18b If you checked the "Yes" box in line 18a, give applicant's true name and trade name, if different than name shown on prior application.

True name ▶

Trade name ▶

18c Enter approximate date, city, and state where the application was filed and the previous employer identification number if known.

Approximate date when filed (Mo./day/year)

Previous EIN

Under penalty of perjury, I declare that I have examined this application and to the best of my knowledge and belief, it is true, correct, and complete.

STEVE J. KREJCI

Name and title (Please type or print clearly.) ▶

Steve J. Krejci

Telephone number (include area code)

407 855 4301

Signature ▶

Date ▶ **4-3-90**

Note: Do not write below this line. For official use only.

Please leave blank ▶

Geo

Ind

Class

Size

Reason for applying

For Paperwork Reduction Act Notice, see attached instructions.

GOVERNMENT PRINTING OFFICE: 1989-202-151/8015

Form SS-4 (Rev. 8-89)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION:

ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
DO NOT WRITE IN THIS SPACE
FILED

1990 APR 16 PM 1:08

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Officer

N04095 8

ZIP + 4 PRESORT

DOG OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD.
6680 99TH AVENUE NORTH
ORLANDO, FL. 32812-4838

2. If Address in Block 1 is incorrect in any way, enter the correct address below. PO Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

2823 TRENTWOOD BLVD

PO Box No 22

City and State 23

ORLANDO FLORIDA

Zip Code 24

32812 4838

3. If your address is the most current, will enter the correct address in item 2 above Zip Code

Date of Filing
07/10/1984

4. FEI Number

☒ FEI Number Applied For
☐ FEI Number Not Applicable

5. A corporation's Officers and Directors (or their successors) are required to furnish to cover over incorrect information:

Name and Address of Each Officer and Director

Name and Address of Each Officer and Director

(Do NOT use Post Office Box Numbers)

City and State

5

P/D

WISSLER, MR. KARL J.

6680 99TH AVENUE NORTH

PINELLAS PARK, FL

V/D

GEORGE A. BURBURAN

4031 CORAL HILLS DRIVE

CORAL SPRINGS, FL.

S/D

MALL, MS. ROSALIND

19559 NW 55 CIRCLE PL.

MIAMI, FL.

T/D

METT, MR. JON

19224 MURCOTT E, S.E.

FT. MYERS, FL

LUKES, CAROL

P.O. BOX 452

DIIRANT, FL.

HALL, MS. ROSALIND

19559 N.W. 55 CIRCLE PL.

MIAMI, FL.

KREJCI, STEVE

2823 TRENTWOOD BLVD.

ORLANDO, FL.

REGISTERED AGENT INFORMATION

1. Name and Address of Current Registered Agent

KREJCI, MR. STEVE
2823 TRENTWOOD BLVD.
ORLANDO, FL. 32812

2. Name and Address of New Registered Agent

Street Address 101 (Do NOT use P.O. Box Number) 80

Street Address 102 (Do NOT use P.O. Box Number) 80

City and State 84

Zip Code 85

FL.

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida, and that the above named corporation is a corporation organized under the laws of the State of Florida, and that the above named corporation is a corporation organized under the laws of the State of Florida.

Signature of Agent
Agent's Signature

DATE

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida, and that the above named corporation is a corporation organized under the laws of the State of Florida, and that the above named corporation is a corporation organized under the laws of the State of Florida.

Signature

Steve Krejci

Date

APRIL 4, 1990

Signature of Registered Officer or Director

Steve Krejci

Treasurer

Telephone Number

(407) 855-4301

11. Signature of Secretary of State or Designated Officer

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee
required for a
Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

AGS-5/11

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

Read Instructions on Other Side Before Making Entries
FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT #N04095 (8)**

ZIP + 4 PRESORT
DOG OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD
ORLANDO, FL. 32812-4838

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

07/10/1984

APPLIED-FO

59-3001594

FEE Number Applied For

5

\$8.75 Additional Fee required
for a Certificate of Status

FEE Number Not Applicable

CERTIFICATE OF STATUS DESIRED

P/D BURBURAN, GEORGE A.

4031 CORAL HILLS DRIVE

CORAL SPRINGS, FL

V/D METT, JON MR.

19224 MURCOTT E, S.E.

FT MYERS, FL

S/D HALL, ROSALIND, MS.

19559 N.W. 55TH CIR PL.

MIAMI, FL

T/D KREJCI, STEVE

2823 TRENTWOOD BLVD.

ORLANDO, FL.

MARILYN

REGISTERED AGENT INFORMATION

KREJCI, MR. STEVE
2823 TRENTWOOD BLVD.
ORLANDO, FL. 32812

MARILYN KREJCI
2823 TRENTWOOD BLVD.

Orlando

FL.

32812

SIGNATURE *Steve Krejci*

DATE

7-26-91

Typed Name of Signing Officer or Director
Marilyn Krejci

Treasurer / Agent

DATE

7-26-91

Telephone Number (Daytime)

407 385-4301

FILING FEE OF \$61.25 REQUIRED—Make Checks Payable To: Secretary of State \$8.75 Additional Fee required
for a Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

**CORPORATION
ANNUAL REPORT
1992**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
H33792
SEC. OF STATE
CORPORATION DIV.
FILED

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT #N04095 (8)**

**DOG OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD
ORLANDO, FL 32812-4838**

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21. Mailing Address

22. P.O. Box No.

23. City and State

24. Zip Code

3. Date Incorporated or Qualified **07/10/1984**

4. To Do Business in Florida

3a. Date of Last Report
08/05/1991

4. FEI Number
59-3001594

FEI Number Applied For

FEI Number Not Applicable

\$8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☒

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer or Director (Do NOT Use Post Office Box Numbers)	City and State
P/D	BURBURAN, GEORGE A.	4031 CORAL HILLS DRIVE	CORAL SPRINGS, FL
V/D	WETT, JON MR.	19224 MURCOTT E, S.E.	FT. MYERS, FL
S/D	HALL, ROSALIND, MS.	19559 N.W. 55TH CIR PL.	MIAMI, FL
T/D	KREJCI, MARILYN	2823 TRENTWOOD BLVD.	ORLANDO, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**KREJCI, MARILYN
2823 TRENTWOOD BLVD.
ORLANDO, FL. 32812**

8. Name and Address of New Registered Agent

81. Name

82. Street Address 1 (Do NOT Use P.O. Box Number)

83. Street Address 2 (Do NOT Use P.O. Box Number)

84. City

85. Zip Code

FL.

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

11. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 8 or an attachment with an address.

SIGNATURE

Typed Name of Signing Officer or Director
MARILYN J. KREJCI

Title

Treasurer

Telephone Number, Daytime

(407) 965-4301

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee.

File Now Filing Fee after May 1 is \$225.00

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
An Official
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
TAMMIEE, FLA.
FILED

1. Name and Mailing Address of Corporation: **DOCUMENT # N04095 (8)**
DOG OBEDIENCE CLUBS OF FLORIDA, INC.
2823 TRENTWOOD BLVD
ORLANDO FL 32812-4838

3. Date Incorporated or Qualified: **10/10/1984** 3a. Date of Last Report: **03/30/1992**

FILING FEE: **\$200.00** ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: **593001594** 5. Certificate of Status Desired: ☒ **Applied For**
☐ **Not Applicable**

2. Mailing Address: 2a. Principle Place of Business
21. **2823 TRENTWOOD BLVD** 26. **Suite, Apt. #, etc.**
22. **ORLANDO FL 32812-4838** 27. **City & State**
23. **Country** 28. **Zip** 29. **Country**
24. **25** 29. **30**

6. Election Campaign Financing: ☐ **\$8.75 Additional Fee Required**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: ☐ **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ **\$138.75 Supplemental Fee Not Required**
☒ **Yes** ☐ **No**

9. Name and Address of Current Registered Agent
KREJCI, MARILYN
2823 TRENTWOOD BLVD.
ORLANDO FL 32812

10. Name and Address of New Registered Agent
81. Name: **UD**
82. Street Address (P.O. Box Number is Not Acceptable):
83. City: **FL** 84. Zip Code: **FL** 85. Country:

11. I, the undersigned, being duly sworn, certify that the information furnished in this report is true and correct, and 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 12, Block 13, Block 14, or on an attachment with an address.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS
1.1 TITLE: **P/D**
1.2 NAME: **BURBURAN, GEORGE A.**
1.3 ADDRESS: **4031 CORAL HILLS DRIVE**
1.4 CITY-STATE-ZIP: **CORAL SPRINGS FL**
2.1 TITLE: **V/D**
2.2 NAME: **WETT, JON MR.**
2.3 ADDRESS: **19224 MURCOTT E. S.E.**
2.4 CITY-STATE-ZIP: **FT MYERS FL**
3.1 TITLE: **S/D**
3.2 NAME: **HALL, ROSALIND, MS.**
3.3 ADDRESS: **19559 N.W. 55TH CIR PL.**
3.4 CITY-STATE-ZIP: **MIAMI FL**
4.1 TITLE: **T/D**
4.2 NAME: **KREJCI, MARILYN**
4.3 ADDRESS: **2823 TRENTWOOD BLVD.**
4.4 CITY-STATE-ZIP: **ORLANDO FL**
5.1 TITLE: **S/D**
5.2 NAME: **HALL, ROSALIND, MS.**
5.3 ADDRESS: **19559 N.W. 55TH CIR PL.**
5.4 CITY-STATE-ZIP: **MIAMI FL**
6.1 TITLE: **T/D**
6.2 NAME: **KREJCI, MARILYN**
6.3 ADDRESS: **2823 TRENTWOOD BLVD.**
6.4 CITY-STATE-ZIP: **ORLANDO FL**

13. OFFICERS AND DIRECTORS CHANGES
1.1 TITLE: **President/D**
1.2 NAME: **Hall, Rosalind, Ms**
1.3 ADDRESS: **19559 N.W. 55 Circle Pl.**
1.4 CITY-STATE-ZIP: **Miami FL**
2.1 TITLE: **Secretary/D**
2.2 NAME: **Sawyer, Jennifer**
2.3 ADDRESS: **8329 Mattituck Circle**
2.4 CITY-STATE-ZIP: **Orlando, FL**
3.1 TITLE: **S/D**
3.2 NAME: **HALL, ROSALIND, MS.**
3.3 ADDRESS: **19559 N.W. 55TH CIR PL.**
3.4 CITY-STATE-ZIP: **MIAMI FL**
4.1 TITLE: **T/D**
4.2 NAME: **KREJCI, MARILYN**
4.3 ADDRESS: **2823 TRENTWOOD BLVD.**
4.4 CITY-STATE-ZIP: **ORLANDO FL**
5.1 TITLE: **S/D**
5.2 NAME: **HALL, ROSALIND, MS.**
5.3 ADDRESS: **19559 N.W. 55TH CIR PL.**
5.4 CITY-STATE-ZIP: **MIAMI FL**
6.1 TITLE: **T/D**
6.2 NAME: **KREJCI, MARILYN**
6.3 ADDRESS: **2823 TRENTWOOD BLVD.**
6.4 CITY-STATE-ZIP: **ORLANDO FL**

14. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made before me.

SIGNATURE: **Marilyn Krejci** DATE: **3-19-93**
Print/Type Name of Signing Officer or Director: **Marilyn Krejci** Title: **Treasurer** Daytime Telephone Number: **(407) 555-1301**

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1994**



FLORIDA DEPARTMENT OF STATE
Joni Smith
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED
MAY 10 1995

1. Corporation Name DOG OBEDIENCE CLUBS OF FLORIDA, INC.	DOCUMENT # N04095 (8)
--	---------------------------------

2. Mailing Address 2823 TRENTWOOD BLVD ORLANDO FL 32812	3. Principal Place of Business 2823 TRENTWOOD BLVD ORLANDO FL 32812
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DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified: **07/10/1984**

5. Date of Last Report: **05/01/1993**

6. Filing Address 2823 TRENTWOOD BLVD ORLANDO FL 32812	7. Principal Place of Business 2823 TRENTWOOD BLVD ORLANDO FL 32812	8. FTS Number 59-3001594	9. Applied For ☐ Yes ☒ No
10. State FL	11. State FL	12. Certificate of Status Desired \$8.75 Additional Fee Required	13. Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No
14. City & State Orlando FL	15. City & State Orlando FL	16. Nonprofit Exempt from \$138.75 ☐ Yes ☒ No	17. \$5.00 May Be Added to Fees ☐ Yes ☒ No
18. Zip 32812	19. Country USA	20. Country USA	21. This corporation has liability for unpaid taxes under S. 118.022 ☐ Yes ☒ No

22. Name and Address of Current Registered Agent KREJCI, MARILYN 2823 TRENTWOOD BLVD. ORLANDO FL 32812	23. Name and Address of New Registered Agent FL 05
--	--

I, the undersigned, being duly sworn, depose and say that the above-named corporation is the owner of the above-named property, and that the above-named corporation is the owner of the above-named property, and that the above-named corporation is the owner of the above-named property.

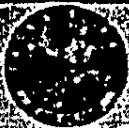
OFFICERS AND DIRECTORS		CHANGES TO OFFICERS AND DIRECTORS	
1. NAME PDX HAM ROSAMOND X M X	2. NAME P/D WISSLER KARL	3. NAME P/D WISSLER KARL	4. NAME P/D WISSLER KARL
5. STREET ADDRESS 18263 NW 55th Circle FLX MARI FLX	6. STREET ADDRESS 6680 199th Ave North Pinellas Park FL 34666	7. STREET ADDRESS 6680 199th Ave North Pinellas Park FL 34666	8. STREET ADDRESS 6680 199th Ave North Pinellas Park FL 34666
9. CITY, ST, ZIP ORLANDO FL 32812	10. CITY, ST, ZIP Pinellas Park FL 34666	11. CITY, ST, ZIP Pinellas Park FL 34666	12. CITY, ST, ZIP Pinellas Park FL 34666
13. NAME WDX JAMES JONMYR	14. NAME V/D HALL ROSALIND	15. NAME V/D HALL ROSALIND	16. NAME V/D HALL ROSALIND
17. STREET ADDRESS 18263 NW 55th Circle S & R FLX 18263 FLX	18. STREET ADDRESS 19559 NW 55th Circle Place Miami FL 33155	19. STREET ADDRESS 19559 NW 55th Circle Place Miami FL 33155	20. STREET ADDRESS 19559 NW 55th Circle Place Miami FL 33155
21. CITY, ST, ZIP ORLANDO FL 32812	22. CITY, ST, ZIP Miami FL 33155	23. CITY, ST, ZIP Miami FL 33155	24. CITY, ST, ZIP Miami FL 33155
25. NAME S/O SAWYER JENNIFER	26. NAME S/O SAWYER JENNIFER	27. NAME S/O SAWYER JENNIFER	28. NAME S/O SAWYER JENNIFER
29. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL	30. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL	31. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL	32. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL
33. CITY, ST, ZIP ORLANDO FL 32812	34. CITY, ST, ZIP ORLANDO FL 32812	35. CITY, ST, ZIP ORLANDO FL 32812	36. CITY, ST, ZIP ORLANDO FL 32812
37. NAME T/D KREJCI MARILYN	38. NAME T/D KREJCI MARILYN	39. NAME T/D KREJCI MARILYN	40. NAME T/D KREJCI MARILYN
41. STREET ADDRESS 2823 TRENTWOOD BLVD ORLANDO FL	42. STREET ADDRESS 2823 TRENTWOOD BLVD ORLANDO FL	43. STREET ADDRESS 2823 TRENTWOOD BLVD ORLANDO FL	44. STREET ADDRESS 2823 TRENTWOOD BLVD ORLANDO FL
45. CITY, ST, ZIP ORLANDO FL 32812	46. CITY, ST, ZIP ORLANDO FL 32812	47. CITY, ST, ZIP ORLANDO FL 32812	48. CITY, ST, ZIP ORLANDO FL 32812
49. NAME S/O SAWYER JENNIFER	50. NAME S/O SAWYER JENNIFER	51. NAME S/O SAWYER JENNIFER	52. NAME S/O SAWYER JENNIFER
53. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL	54. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL	55. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL	56. STREET ADDRESS 8329 MATTHEW CIRCLE ORLANDO FL
57. CITY, ST, ZIP ORLANDO FL 32812	58. CITY, ST, ZIP ORLANDO FL 32812	59. CITY, ST, ZIP ORLANDO FL 32812	60. CITY, ST, ZIP ORLANDO FL 32812

I, the undersigned, being duly sworn, depose and say that the above-named corporation is the owner of the above-named property, and that the above-named corporation is the owner of the above-named property, and that the above-named corporation is the owner of the above-named property.

SIGNATURE: **Marilyn Krejci**

FILE WITH FILING FEE AFTER MAY 1 IS \$165.00

**ANNUAL REPORT
1995**



**OFFICE OF THE SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # NO4095

(8)

DOG OBEDIENCE CLUBS OF FLORIDA, INC.

**FILED
95 APR 19 AM 8:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

Principal Place of Business
2823 TRENTWOOD BLVD
ORLANDO FL 32812

Mailing Address
2823 TRENTWOOD BLVD
ORLANDO FL 32812

1. Date Reported or Qualified 07/10/1994
2. Date of Last Report 01/27/1994
3. Filing Method ☒ Regular ☐ Expedited
4. Filing Fee \$68.75
5. Additional Fee Required ☐ Yes ☒ No

2a. Principal Place of Business
2b. Mailing Address
2c. State, Apt. #, etc.
2d. City & State
2e. Zip
2f. Country

6. Election Campaign Financing
7. Nonprofit with 990-BL
8. This corporation has liability for interstate tax under 8-1001002
9. Florida Statutes

3. Name and Address of Current Registered Agent
KREJCI, MARILYN
2823 TRENTWOOD BLVD.
ORLANDO FL 32812

10. Name and Address of New Registered Agent
11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation. I, as officer or director, hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

12.1	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PO	WISSLER, KARL	6680 - 99TH AVE., NORTH PINELLAS PARK FL	
	PO	ROSALENE	2608 NW 36th	DADE CO FL
	SD	SAWYER, JENNIFER	8329 MATTHEW CIRCLE ORLANDO FL	
	TD	KREJCI, MARILYN	2823 TRENTWOOD BLVD. ORLANDO FL	

12.2	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	V/D	GROTHBERG, NANCY	4211 Crestdale Street Palm Beach Gardens FL	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as I 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Marilyn Krejci