2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000007433

1. Entity Name
MID FLORIDA DOG CLUB INC.

Principal Place of Business	Mailing Address
1511 CLARENDON STREET LAKE PLACID, FL 33852	1511 CLARENDON STREET LAKE PLACID, FL 33852

DO NOT WRITE IN THIS SPACE

01062007 No Chg-NP CR2E037 (4/06)

4. FEI Number
43-2086263

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GEIGER, FRANCIS
1511 CLARENDON STREET
LAKE PLACID, FL 33852

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GEIGER, FRANCIS
STREET ADDRESS	1511 CLARENDON STREET
CITY-ST-ZIP	LAKE PLACID, FL 33852
TITLE	V
NAME	UMBERTO-WELLS, BETTY
STREET ADDRESS	11067 117 LANE N
CITY-ST-ZIP	LARGO, FL 34648
TITLE	S
NAME	LEA-HANSON, JOYCE
STREET ADDRESS	945 SOUTH 1500 EAST
CITY-ST-ZIP	CLEARFIELD, UT 84015
TITLE	D
NAME	WELLS, DON
STREET ADDRESS	11067 117 LANE N
CITY-ST-ZIP	SEMINOLE, FL 33778
TITLE	D
NAME	TAYEB, LORRAINE
STREET ADDRESS	1295 W 300 N
CITY-ST-ZIP	CLEARFIELD, UT 84015
TITLE	D
NAME	KINSCH, RACHAEL
STREET ADDRESS	6222 LAUREL CREEK TRAIL
CITY-ST-ZIP	ELLENTON, FL 34222

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01/10/07-80090-006 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Francis Geiger, Registered Agent & President 01/09/07 (863) 531-0233
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #