

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012507

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** HURRICANE ALLEY AMERICAN HAIRLESS TERRIER ASSOCIATION, INC.

**Current Principal Place of Business:**

31415 PASCO ROAD  
SAN ANTONIO, FL 33576

**New Principal Place of Business:**

**Current Mailing Address:**

31415 PASCO ROAD  
SAN ANTONIO, FL 33576

**New Mailing Address:**

**FEI Number:** 76-0810078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PINGEL, KARYN S  
31415 PASCO ROAD  
SAN ANTONIO, FL 33576 US

**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: P  
Name: PINGEL, KARYN S  
Address: 31415 PASCO ROAD  
City-St-Zip: SAN ANTONIO, FL 33576

Title: VP  
Name: TRAPP, JO  
Address: 1272 KENWORTH DR.  
City-St-Zip: APOPKA, FL 32712

Title: T  
Name: TURNER, JOHN M  
Address: 988 LIVE OAK RD  
City-St-Zip: ARAGON, GA 30104

Title: S  
Name: PEREZ-CEELY, MARIA  
Address: 2162 QUIET CREEK PLACE  
City-St-Zip: ROCK HILLIO, SC 29732

Title: D  
Name: WHITE, VERYL  
Address: 4826 GACHET BLVD. S  
City-St-Zip: LAKELAND, FL 33813

Title: D  
Name: BRUNNEAU, PAUL  
Address: 4093 LYNBROOK DR.  
City-St-Zip: ZEPHYTHILLS, FL 33540

I hereby 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 all other like empowered.

SIGNATURE: JOHN M. TURNER

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01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date