2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2008 8:00 am
Secretary of State
02-11-2008 90046 018 ****70.00

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1. Entity Name

GREAT DANE CLUB OF NORTH CENTRAL FLORIDA, INC.

Principal Place of Business	Mailing Address
2281 ALTON ROAD DELTONA FL 32738	2281 ALTON ROAD DELTONA FL 32738

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8300 SW 2nd Ct.	8300 SW 2nd Ct
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Ocala, Florida	Ocala, Florida
City & State	City & State
Zip: 34476 Country: Marion	Zip: 34476 Country: Marion

4. FEI Number: 26-0448435 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HUTCHINSON, JAN
8300 SW 2ND COURT
OCALA FL ~~32738~~ 34476

7. Name and Address of New Registered Agent

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: Jan Hutchinson

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

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P WAGNER, TERRY 2281 ALTON ROAD DELTONA FL 32738	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Vivian St. Pierre 1611 Ruthledge Rd. Longwood, FL 32779	☐ Change ■ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V POTTER, JANE 2740 SW 7TH AVE OCALA FL 34374	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Anne Marie Gatto 18893 NW 114th Loop Ocala, FL 34475	☐ Change ■ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HUTCHINSON, JAN 8300 SW 2ND COURT OCALA FL 34476	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Martha Davidson 528 Falls Court Green Cover Springs FL 32045	☐ Change ■ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WAGNER, VALERIE 2281 ALTON ROAD DELTONA FL 32738	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Terry Goldman 3640 Landale Drive Holiday FL 34691	☐ Change ■ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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 exemptions contained in Section 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: Jan Hutchinson JAN Hutchinson 2-4-08 352-237-1540

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #