

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09366

FILED  
Jan 27, 2008  
Secretary of State

**Entity Name:** FORT MYERS GERMAN SHEPHERD DOG CLUB, INC.

**Current Principal Place of Business:**

9430 WHEELER ROAD  
LEHIGH ACRES, FL 33972 US

**New Principal Place of Business:**

5560 CYNTHIA LANE  
NAPLES, FL 34112 US

**Current Mailing Address:**

P.O.BOX 1476  
LEHIGH ACRES, FL 33970 US

**New Mailing Address:**

5560 CYNTHIA LANE  
NAPLES, FL 34112 US

**FEI Number:** 27-0023246

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANGENBACH, KLAUS  
9430 WHEELER ROAD  
LEHIGH ACRES, FL 33972 US

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

STEINKOPF, SANDRA  
5560 CYNTHIA LANE  
NAPLES, FL 34112 US

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: SANDRA STEINKOPF

01/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: RITA SANDELL  
Address: 3115 GULF SHORE BLVD. N 408 SOUTH  
City-St-Zip: NAPLES, FL 34103 US

Title: VP ( ) Delete  
Name: BACHMANN, VEIT  
Address: 10911 SHARON DRIVE  
City-St-Zip: N. FT. MYERS, FL 33917

Title: TREA ( ) Delete  
Name: LANGENBACH, KLAUS  
Address: P.O. BOX 1476  
City-St-Zip: LEHIGH ACRES, FL 33970

Title: CSEC ( ) Delete  
Name: STEINKOPF, SANDY  
Address: 5560 CYNTHIA LANE  
City-St-Zip: NAPLES, FL 34112 US

Title: RSEC ( ) Delete  
Name: GOERN, GABRIELE  
Address: 7329 COON RD.  
City-St-Zip: N. FT. MYERS, FL 33917

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: STEINKOPF, SANDRA  
Address: 5560 CYNTHIA LANE  
City-St-Zip: NAPLES, FL 34112

Title: TREA (X) Change ( ) Addition  
Name: STEINKOPF, SANDRA  
Address: 5560 CYNTHIA LANE  
City-St-Zip: NAPLES, FL 34112

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RITA SANDELL

PRES

01/27/2008

Electronic Signature of Signing Officer or Director

Date