

# 2000 UNIFORM BUSINESS REPORT (UBR)

5

DOCUMENT # N14094

1. Entity Name

SOUTHWEST FLORIDA SCHUTZHUND CLUB, INC.

**FILED**  
**Jun 27, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90977 012 \*\*\*\*61.25

Principal Place of Business

Mailing Address

P.O. BOX 3668  
NORTH FT. MYERS FL 33918

2141 LOCHMOOR CR.  
NORTH FT. MYERS FL 33903-4926

**R**

2. Principal Place of Business

3411 N. Tamiami Trail

Suite, Apt. #, etc.

City & State

Naples, Florida

Zip

34103

Country

USA

3. Mailing Address

3411 N. Tamiami Trail

Suite, Apt. #, etc.

City & State

Naples, Florida

Zip

34103

Country

USA

4. FEI Number

65-0015090

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MAYOR, JOHN A  
2141 LOCHMOOR CR  
N. FT. MYERS FL 33903

7. Name and Address of New Registered Agent

Name

David Frye

Street Address (P.O. Box Number is Not Acceptable)

3411 N. Tamiami Trail

City

Naples

FL

Zip Code  
34103

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.

SIGNATURE David Frye / President

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

(NOTE: Registered Agent's signature required when reinstating)

04/28/2000

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD  
TAYLOR, ROBERT D  
4210 3RD S.W.  
LEHIGH ACRES FL 33971

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD  
MAYOR, JOHN A  
2141 LOCHMOOR CR  
N FT MYERS FL 33903

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD  
RENDEIRO, TINA  
3141 LOCHMOOR CR.  
NORTH FT. MYERS FL 33903

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD

David Frye

3411 N. Tamiami Trail  
Naples, Florida 34103

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD

Michelle Frye

3411 N. Tamiami Trail  
Naples, Florida 34103

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD

Richard Hall

12288 S.W. CR 769  
Arcadia, Florida 34266

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

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 exemption stated in Section 119.07(3)(i), 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:

**SIC**

04/28/2000

941-337-1300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)