## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL R	EPUNI (AN)		May 00 20	06 00.00	A TAT	
DOCUMENT # N14781 1. Entity Name				Mar 09, 2006 08:00 AM Secretary of State			
SHIH TZU	FANCIERS OF CENTRAL F	FLORIDA, INC.					
Principal Place of Business		Mailing Address		1			
1000 ELM ST. OVIEDO FL 32765 US		117 HICKORY CREEK DRIVE BRANDON FL 33511 US					
2. Principal Place of Business		3. Mailing Address		1195/1101 301 1101 3101 1101			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E037 (10/05)			
City & State		City & State		4. FEI Number 59-2704672	<del></del>	plied For t Applicati	
Zip Country		Zip	Country	5. Certificate of Status Desired	SR 75 Additional		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Reg			
			Name	Name			
CARLENE SNYDER 117 HICKORY CREEK DRIVE			Street Address	ss (P.O. Box Number is Not Acceptable)			
BRANDON FL 33511			City		Zip Code		
<del></del>	named entity submits this statement			the Black of Francisco	rl		
N/A SIGNATURE	Signature, typed or privace name of registrated agent	g. Election Carr	Registated Agent expression require	\$5.00 May Be Mak	CATE , 2001 e Check Payable	to	
3	Due By May 1, 2006	Trust Fund C			a Department of S	هُوَّ أَنْ أَنْهُ إِنْ مِنْ أَنْهُمْ اللهِ اللهِ وَ هُوْ أَنْ أَنْهُمْ اللهِ اللهِ اللهِ اللهِ اللهِ	
TO.	OFFICERS AND D	IRECTORS Delete	11.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN  Change	<u>130_</u> □ A≪	
NAME	STEPHEN, LEE	€ Delete	NAME	HODOONAG		_	
STREET ADDRESS CITY-ST-ZIP	1744 SUNWOOD DRIVE LONGWOOD FL 32779	-	STREET ADDRESS City-St-Zip	00000460687 03/20/06-80020-003 61.25			
TITLE	S	☐ Delete	TITLE		☐ Change	<b>□</b> Addi	
MAME STREET ADDRESS CITY-SI-ZIP	PONTIUS, LILA 720 COUNTY ROAD 304 BUNNELL FL 32110		STREET ADDRESS CJSY-ST-ZIP				
TITLE	D	☐ Delete	TILE		☐ Change		
NAME PTOPLL ADDRESS	WILSON, JANICE		NAME CTORET ADRIDGES				
STREE! ADDRESS CITY-ST-ZIP	6606 LUNN ROAD LAKELAND FL 3811	_	STREET ADDRESS CATY-ST-20P				
HIFE	Т	☐ Delete	THE		☐ Change		
NAME STREET ADDRESS	SNYDER, CARLENE		NAME STREET ADDRESS				
CITY-ST-ZIP	BRANDON FL 33511		CITY-SI-ZIP		_		
PATE	P	☐ Delete	TITLE		☐ Change	☐ M.··	
NAME STREET ADDRESS	CUNNINGHAM, WILLIAM		NAME STREET ADDRESS				
CITY-S1-ZIP	OVIEDO FL 32765		CITY-ST-ZIP				
HIVE	D ANN	☐ Oelete	TITLE		☐ Change	D Adv	
NAME STREET ADDRESS	WHITE, JO ANN 5136 36TH STREET WEST		NAME STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL 33813		CITY-ST-ZIP				
12. I hereby indicated of the confidence of the	certify that the information supplied wild on this report or supplemental report or progration or the receiver or trustee ered, or on an attachment with an additional trustee.	with this filling does not quality to its true and accurate and that in mpowered to execute this repowers, with all other like ampowers.	for the exemptions contain my signature shall have the nt as required by Chapter to red.	ned in Section 119, Florida Statutes. I e same legal effect as if made under of 617, Florida Statutes; and that my named the statutes in the s			

**FILED** 

May 2 200% 813-1084.2491