

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14781

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** SHIH TZU FANCIERS OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1744 SUNWOOD DR  
LONGWOOD, FL 327792790 US

**New Principal Place of Business:**

**Current Mailing Address:**

1744 SUNWOOD DR  
LONGWOOD, FL 327792790 US

**New Mailing Address:**

**FEI Number:** 59-2704672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEPHENS, LEE  
1744 SUNWOOD DRIVE  
LONGWOOD, FL 32779 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: S  
Name: STEPHEN, LEE  
Address: 1744 SUNWOOD DRIVE  
City-St-Zip: LONGWOOD, FL 32779

Title: VP  
Name: CUNNINGHAM, WILLIAM  
Address: 1000 ELM ST.  
City-St-Zip: OVIEDO, FL 32765

Title: P  
Name: WHITE, JO ANN  
Address: 5136 36TH ST W  
City-St-Zip: BRADENTON, FL 34210 US

Title: T  
Name: KARTUB, DORIS  
Address: 535 S.W. 48TH LANE  
City-St-Zip: OCALA, FL 34471

Title: D  
Name: SNYDER, CARLENE  
Address: 117 HICKORY CREEK DR.  
City-St-Zip: BRANDON, FL 33511

Title: D  
Name: WILSON, JANICE  
Address: 6606 LUNN ROAD  
City-St-Zip: LAKE LAND, FL 33811

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: LEE STEPHENS

S

04/19/2011

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

\_\_\_\_\_  
Date