

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2004 8:00 am
Secretary of State

03-18-2004 90023 032 ****61.25

66414020



MOORE CR2E037 (11/03)

DOCUMENT # N22889 1. Entity Name OCHLOCKONEE RIVER KENNEL CLUB OF FLORIDA, INC.																																																																																																																													
Principal Place of Business 17 WASHINGTON ST CHATTAHOOCHEE FL 32324 US		Mailing Address P O BOX 3185 TALLAHASSEE FL 32315 US		66414020																																																																																																																									
2. Principal Place of Business		3. Mailing Address																																																																																																																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																											
City & State		City & State																																																																																																																											
Zip		Country		4. FEI Number 59-2810153 Applied For Not Applicable																																																																																																																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent BRADLEY, TOM 17 WASHINGTON ST CHATTAHOOCHEE FL 32324																																																																																																																									
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 3/15/4 Signature, typed or printed name of registered agent and if not applicable. (NOTE: Registered Agents signature required when reissuing) DATE																																																																																																																													
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State																																																																																																																									
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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: Tom Bradley 4/18/4 850-663-2121 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																																													