

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35510

FILED
Apr 24, 2007
Secretary of State

Entity Name: GREYHOUNDS AS PETS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

4490 SOUTHSIDE BLVD
JACKSONVILLE, FL 322164997

New Principal Place of Business:

455 PARK AVENUE
ORANGE PARK, FL 32073

Current Mailing Address:

4490 SOUTHSIDE BLVD
JACKSONVILLE, FL 322164997

New Mailing Address:

P.O. BOX 959
ORANGE PARK, FL 320670959

FEI Number: 59-2991174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUHN, W. ROBERT JR.
4490 SOUTHSIDE BLVD
JACKSONVILLE, FL 322164997 US

Name and Address of New Registered Agent:

KUHN, W. ROBERT JR.
455 PARK AVENUE
ORANGE PARK, FL 32073 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:

04/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEUSCHNER, TIMOTHY
Address: 1811 WATERBURY LANE
City-St-Zip: ORANGE PARK, FL 32093

Title: D () Delete
Name: CROWE, JOHN
Address: 3323 MABRY TERRACE
City-St-Zip: JACKSONVILLE, FL 32254

Title: TD () Delete
Name: KUHN, W. ROBERT JR.
Address: 13210 PECKY CYPRESS DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: CLARK, KELLY J
Address: 2036 FROGMORE DRIVE
City-St-Zip: MIDDLEBURG, FL 32068

Title: VD () Delete
Name: COOKSEY, SANDRA
Address: 2244 MARCEL DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: SD () Delete
Name: NURMELA, KARLA
Address: 7882 CHASE MEADOWS DR., W.
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: W. ROBERT KUHN, JR.

T

04/24/2007

Electronic Signature of Signing Officer or Director

Date