05111999-90029-025-$70.00-$70.00

FILED
May 11, 1999 8:00 am
Secretary of State
05-11-1999 90029 025 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N36941

1. Corporation Name
THE PUG CLUB OF SOUTH FLORIDA, INC.

578940 - 90002 - 49

Principal Place of Business	Mailing Address
3363 SHERIDAN ST SUITE 201 HOLLYWOOD FL 33021 US	3363 SHERIDAN ST SUITE 201 HOLLYWOOD FL 33021 US

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

3. Date Incorporated or Qualified: 03/02/1990

4. FEI Number: 65-0072536 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MASON, STEVEN A.
3363 SHERIDAN ST
SUITE 201
HOLLYWOOD FL 33021

81 82 83 84

10. Name and Address of New Registered Agent

ANTLE, WOODROW L.
208 FARMINGTON DR.
PLANTATION FL 33317

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fa ... Florida Statutes.

SIGNATURE Woodrow L. Antle DATE 4-12-99
Signature, typed or printed name of registered agent and title if applicable. (REQUIRED: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MASON, STEVEN A 3363 SHERIDAN ST SUITE 201 HOLLYWOOD FL 33021	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	T/D JUDI CROWE 1520 SW 5th AVE POMPANO BEACH, FL 33060	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CROWE, JUDITH 1520 SW 5TH AVE POMPANO BEACH FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D MIKE McGRATH 22545 SW 66th AVE #V206 BOCA RATON, FL 33428	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MASON, DALE 2520 SW 55TH ST FT LAUDERDALE FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D CATHY O'CONNELL 22545 SW 66th AVE #V206 BOCA RATON, FL 33428	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D ANTLE, WOODROW L. 208 FARMINGTON DR PLANTATION, FL 33317	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D DALE MASON 2520 SW 55th ST FT. LAUDERDALE, FL 33312	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D BILL BURKE 4701 LYONS ROAD #140 COCONUT CREEK, FL 33073	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D KELLY HORTON 14921 WINDBLUFF ST DAVIE, FL 33331	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 exe ... 17, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all ot

SIGNATURE: Woodrow L. Antle RE REQU WOODROW L. ANTLE 4/12/99 954-587-0556
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #