

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43438

1. Entity Name

NORTH CENTRAL FLORIDA DOG HUNTERS ASSOCIATION, I

FILED
Feb 28, 2000 8:00 am
Secretary of State

02-28-2000 90070 016 ****61.25

Principal Place of Business

Mailing Address

950 NW 160TH STREET
TRENTON FL 32693
US

P.O. BOX 1743
CHIEFLAND FL 32644-1743
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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.

SIGNATURE

WENDELL JENKINS V.P.

Wendell Jenkins

2-15-2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete

NAME
CARTER, ED
STREET ADDRESS
RT#3 BOX 4230
CITY-ST-ZIP
FT WHITE FL 32038

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
JENKINS, WENDELL
STREET ADDRESS
950 NW 160TH ST
CITY-ST-ZIP
TRENTON FL 32693

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
STUDSTILL, BRUCE
STREET ADDRESS
7200 SE 110TH STREET
CITY-ST-ZIP
TRENTON FL 32693

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
STEPHENS, JOHN W SR
STREET ADDRESS
7470 NW 95TH STREET
CITY-ST-ZIP
CHIEFLND FL 32626

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
CARTER, WESLEY
STREET ADDRESS
15830 NE 10TH STREET
CITY-ST-ZIP
GAINESVILLE FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
STEPHENS, JOHN W JR
STREET ADDRESS
7470 NW 95TH ST
CITY-ST-ZIP
CHIEFLND FL 32626

TITLE ☐ Change ☐ Addition

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:

WENDELL JENKINS V.P.

2-15-2000

(352) 463-6494

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)