

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44387 (1)
1. Corporation Name

SIBERIAN HUSKY CLUB OF TAMPA BAY, INC.



Principal Place of Business
16110 W. LAKE BURRELL DRIVE
LUTZ FL 33549
US

Mailing Address
16110 W. LAKE BURRELL DRIVE
LUTZ FL 33549
US

3. Date Incorporated or Qualified
07/23/1991

3a. Date of Last Report
04/17/1995

2. Principal Place of Business
21 512 Robin Hill Cir.

2a. Mailing Address
26 512 Robin Hill Cir.

4. FEI Number
59-2977643

Applied For
Not Applicable

Suite, Apt. #, etc.

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

22 City & State
23 Brandon, Florida

27 City & State
28 Brandon, Florida

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

24 Zip 33510 Country USA

25 Zip 33510 Country USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EGINTON, ELIZABETH
16110 W. LAKE BURRELL DRIVE
LUTZ FL 33549

81 Name Donna J. Acevedo

82 Street Address (P.O. Box Number is Not Acceptable)
512 Robin Hill Cir.

83

84 City Brandon FL 85 Zip Code 33510

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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Donna J. Acevedo Donna J. Acevedo, Treasurer April 25, 1996
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME STOTT, JOHN
STREET ADDRESS 10364 CHADBOURNE DRIVE
CITY-ST-ZIP TAMPA FL 33624

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
200001859132
-06/12/96--01018--022
***61.25

TITLE V ☐ DELETE
NAME KELLY, LINDA
STREET ADDRESS 101706 61ST WAY N.
CITY-ST-ZIP PINELLAS PARK FL 34666

21 TITLE V ☒ Change ☐ Addition
22 NAME Van Cleve, Linda
23 STREET ADDRESS 5946 Bayou Grande Blvd. NE
24 CITY-ST-ZIP St. Petersburg, FL 33703

TITLE T ☐ DELETE
NAME EGINTON, ELIZABETH
STREET ADDRESS 16110 W. LAKE BURRELL DRIVE
CITY-ST-ZIP LUTZ FL 33549

31 TITLE T ☒ Change ☐ Addition
32 NAME Acevedo, Donna J.
33 STREET ADDRESS 512 Robin Hill Cir.
34 CITY-ST-ZIP Brandon, FL 33510

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE
42 NAME Johnson, Lorraine "D"
43 STREET ADDRESS 1707 Westerly Drive
44 CITY-ST-ZIP Brandon, FL 33511

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE
52 NAME Anderton, Marilyn "D"
53 STREET ADDRESS 11373 67th Avenue North
54 CITY-ST-ZIP Seminole, FL 34642

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME Werder, Theresa "D"
63 STREET ADDRESS 615 Woodlawn Avenue
64 CITY-ST-ZIP St. Petersburg, FL 34616

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Donna J. Acevedo Donna J. Acevedo April 25, 1996 (813) 689-0731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)