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**Feb 24, 1999 8:00 am**  
**Secretary of State**

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



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

**DOCUMENT # N44387**

1. Corporation Name

**SIBERIAN HUSKY CLUB OF TAMPA BAY, INC.**

Principal Place of Business

512 ROBIN HILL CIR.  
BRANDON FL 33510  
US

Mailing Address

512 ROBIN HILL CIR.  
BRANDON FL 33510  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

07/23/1991

4. FEI Number  
59-2977643

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

ACEVEDO, DONNA J.  
512 ROBIN HILL CIR.  
BRANDON FL 33510

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

TITLE V ☐ DELETE  
NAME VAN CLEVE, LINDA  
STREET ADDRESS 5946 BAYOU GRANDE BLVD. NE  
CITY-ST-ZIP ST. PETERSBURG FL 33073

TITLE T ☐ DELETE  
NAME ACEVEDO, DONNA J.  
STREET ADDRESS 512 ROBIN HILL CIR.  
CITY-ST-ZIP BRANDON FL 33510

TITLE D ☐ DELETE  
NAME JOHNSON, LORRAINE  
STREET ADDRESS 1707 WESTERLY DR.  
CITY-ST-ZIP BRANDON FL 33511

TITLE D ☐ DELETE  
NAME STOTT, CONNIE  
STREET ADDRESS 10364 CHADBOURNE DR  
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE  
NAME WRIGHT, PEGGY  
STREET ADDRESS 5547 BATES ST  
CITY-ST-ZIP SEMINOLE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

KUDERICK, MARY "D"  
3904 LITHIA RIDGE BLVD.  
VALRICO FL 33594

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: *Donna Acevedo* **SIGNATURE REQUIRED** ACEVEDO

February 1, 1999 (813) 689-0731

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)