2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006
Secretary of State

DOCUMENT# N44965

Entity Name: JACKSONVILLE SHETLAND SHEEPDOG CLUB, INC.

Current Principal Place of Business:

54089 HUNTER ROAD
CALLAHAN, FL 32011

New Principal Place of Business:

Current Mailing Address:

54089 HUNTER ROAD
CALLAHAN, FL 32011

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SYBELNIK, TAMMIE J.
54089 HUNTER ROAD
CALLAHAN, FL 32011 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: COLEMAN, SHELIA
Address: 1909 ED JOHNSON DR
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: V ( ) Delete
Name: MILLER-GRIFFITH, CYNTHIA
Address: 118 OCEAN BLVD
City-St-Zip: ST. AUSGUTINE, FL 32095 US

Title: S ( ) Delete
Name: LAUFER, CHRISTINA
Address: 23575 NW 42ND AVENUE
City-St-Zip: LAWTEY, FL 32058 US

Title: D ( ) Delete
Name: REED, TERESA
Address: 4083 SUNBEAM ROAD #415
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D ( ) Delete
Name: COUEY, MARIE
Address: 8761 6TH AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D ( ) Delete
Name: HOMAN, REBECCA
Address: 16085 PUSKITA TRAIL
City-St-Zip: JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COLEMAN, SHELIA
Address: 1909 ED JOHNSON DR
City-St-Zip: JACKSONVILLE, FL 32226 US

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

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

Title: T (X) Change ( ) Addition
Name: REED, TERESA
Address: 4083 SUNBEAM ROAD #415
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D (X) Change ( ) Addition
Name: SYBELNIK, TAMMIE
Address: 54089 HUNTER ROAD
City-St-Zip: CALLAHAN, FL 32011

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: TAMMIE J. SYBELNIK D 03/06/2006

Electronic Signature of Signing Officer or Director Date