

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48478

FILED  
Jan 23, 2009  
Secretary of State

**Entity Name:** CENTRAL FLORIDA HUNTING RETRIEVER CLUB, INC.

**Current Principal Place of Business:**

1920 MICHELS DR NE  
PALM BAY, FL 32905 US

**New Principal Place of Business:**

**Current Mailing Address:**

1920 MICHELS DR NE  
PALM BAY, FL 32905 US

**New Mailing Address:**

**FEI Number:** 59-3122519

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COURTNEY, JINNY  
1920 MICHELS DR NE  
PALM BAY, FL 32905 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: PD ( ) Delete  
Name: STUBBS, TRACY  
Address: 1955 SNLINER RD  
City-St-Zip: SAINT CLOUD, FL 34771

Title: TD ( ) Delete  
Name: COURTNEY, JINNY  
Address: 1920 MICHELS DR NE  
City-St-Zip: PALM BAY, FL 32905

Title: VD ( ) Delete  
Name: THARP, TODD  
Address: 15519 VINOLA COURT  
City-St-Zip: MONTVERDE, FL 34756

Title: SD ( ) Delete  
Name: CURTIN, KEVIN  
Address: 5111 LEEWARD WAY  
City-St-Zip: ORLANDO, FL 32809

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: STUBBS, TRACY  
Address: 1955 DRULINER RD  
City-St-Zip: SAINT CLOUD, FL 34771

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JINNY COURTNEY

TD

01/23/2009

Electronic Signature of Signing Officer or Director

Date