2004 NOT-FOR-PROFIT CORPORATION

CITY-ST-ZIP

SIGNATURE:

FILED **ANNUAL REPORT** Feb 03, 2004 08:00 AM DOCUMENT # N50723 **Secretary of State** CORAL SPRINGS DOG DAY RUN, INC. Principal Place of Business Mailing Address 7460 WILES ROAD 7460 WILES ROAD CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 01052004 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0370680 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PAUL, STEVEN G. DO NOT WRITE 7460 WILES RD CORAL SPRINGS, FL 33067 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2004 10. OFFICERS AND DIRECTORS TITLE NAME PAUL, STEVEN G STREET ADDRESS 7460 WILES ROAD U00000030130 02/04/04-80095-019 61.25 CITY-ST-ZIP CORAL SPRGS, FL TITLE NAME PAUL, JILL STREET ADDRESS 7460 WILES ROAD CITY-ST-ZIP CORAL SPRINGS, FL TITLE NAME PAUL, NORMAN STREET ADDRESS 7460 WILES ROAD DO NOT WRITE CITY-ST-ZIP CORAL SPRINGS, FL TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(7), 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 chapter of the proportion of the receiver of the receiver of the proportion of 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