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Mar 04 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N94000002872 (9)

1. Corporation Name

SOUTH FLORIDA LABRADOR RETRIEVER CLUB, INC.



Principal Place of Business

Mailing Address

5400 REDWOOD RD  
PLANTATION FL 33317  
US

5400 REDWOOD RD  
PLANTATION F 33317-1910  
US

3. Date Incorporated or Qualified  
06/09/1994

3a. Date of Last Report  
03/05/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
65-0546669

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

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

TAPE, JOHN  
5400 REDWOOD RD  
PLANTATION FL 33317

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 BERRY, DEBORAH  
STREET ADDRESS 5700 SW 196TH LANE  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE VP ☐ DELETE  
NAME BIRD, POLLIE  
STREET ADDRESS 1302 32ND ST W  
CITY-ST-ZIP BRADENTON FL

TITLE T ☐ DELETE  
NAME TAPE, JOHN  
STREET ADDRESS 5400 REDWOOD RD  
CITY-ST-ZIP PLANTATION FL

TITLE S ☒ DELETE  
NAME WULLSCHLEGER, LEE  
STREET ADDRESS 1301 MANGO ISLE  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE T ☐ DELETE  
NAME TROAST, DENISE  
STREET ADDRESS 3800 SSW 136TH AVE  
CITY-ST-ZIP MIRAMAR F

TITLE T ☐ DELETE  
NAME WIECHERS, MONA  
STREET ADDRESS 460 MT VERNON DR E  
CITY-ST-ZIP PLANTATION FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE BOARD MEMBER ☐ Change ☒ Addition  
1.2 NAME LEE GARNES  
1.3 STREET ADDRESS 3101 N.E. 27 AVE.  
1.4 CITY-ST-ZIP WATHOUSE POINT FL 33644

2.1 TITLE DEBBIE BATES ☐ Change ☒ Addition  
2.2 NAME  
2.3 STREET ADDRESS 2913 RIVERLAND RD.  
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33312

3.1 TITLE BOARD MEMBER ☐ Change ☒ Addition  
3.2 NAME MARGA CHRISTIAN  
3.3 STREET ADDRESS 24506 S.W. 193RD AVE  
3.4 CITY-ST-ZIP HOMESTEAD, FL 33031

4.1 TITLE SECRETARY ☒ Change ☐ Addition  
4.2 NAME LINDA JORDAN  
4.3 STREET ADDRESS 4100 S.W. 122 AVE  
4.4 CITY-ST-ZIP MIAMI, FL 33175

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 do 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.

SIGNATURE: John Tape JOHN TAPE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0086608

CP2E037 (9/96)