

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000005014

FILED
Apr 30, 2003
Secretary of State

Entity Name: ABS GUIDE DOGS, INC.

Current Principal Place of Business:

3849 OAKWATER CIRCLE
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

3849 OAKWATER CIRCLE
ORLANDO, FL 32806 US

New Mailing Address:

FEI Number: 59-3556474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOUCHARD, BRENDA
740 CRESTVIEW DRIVE
CASSELBERRY, FL 32707

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: CARR, W. DAVID
Address: 5033 PLEASURE ISLAND RD
City-St-Zip: ORLANDO, FL 32829

Title: VPD () Delete
Name: CARR, NELL M
Address: 6631 HARVEY STREET
City-St-Zip: ORLANDO, FL 32809

Title: SD () Delete
Name: BOUCHARD, BRENDA
Address: 740 CRESTVIEW DR
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: BRENDA BOUCHARD

SD

04/30/2003

Electronic Signature of Signing Officer or Director

Date