

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 12, 2004
Secretary of State**

DOCUMENT# N98000000805

Entity Name: FLORIDA DOBERMAN RESCUE, INC.

Current Principal Place of Business:

66 MOODY DR
PALM COAST, FL 32137 US

New Principal Place of Business:

1451 TAMA RAN PLACE
JACKSONVILLE, FL 32259 US

Current Mailing Address:

1093 A1A BEACH BLVD
#343
ST AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 59-3492619 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHESTNUT, PAIGE
66 MOODY DR
PALM COAST, FL 32137

Name and Address of New Registered Agent:

CHESNUT, PAIGE
1093 A1A BEACH BLVD.
#343
ST. AUGUSTINE, FL 32080

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: PAIGE CHESNUT 01/12/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: CHESTNUT, STEVEN
Address: 66 MOODY DR.
City-St-Zip: PALM COAST, FL 32137

Title: PTD () Delete
Name: CHESTNUT, PAIGE
Address: 66 MOODY DR.
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: LEO, DORIS
Address: 2800 NW 32ND ST
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: BARNES, RANDY
Address: 1451 TAMA RAN PLACE
City-St-Zip: JACKSONVILLE, FL 32259

Title: PD (X) Change () Addition
Name: BARNES, JANE
Address: 1451 TAMA RAN PLACE
City-St-Zip: JACKSONVILLE, FL 32259

Title: TD (X) Change () Addition
Name: CHESNUT, PAIGE
Address: 1093 A1A BEACH BLVD. #343
City-St-Zip: ST. AUGUSTINE, FL 32080

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: PAIGE CHESNUT TD 01/12/2004
Electronic Signature of Signing Officer or Director Date