

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001887

1. Entity Name

K-9 SEARCH AND RESCUE TEAMS OF FLORIDA, INC. - P  
INELLAS COUNTY UNIT

Principal Place of Business

Mailing Address

1642 HOBBIT RD  
DUNEDIN FL 34698

1642 HOBBIT RD  
DUNEDIN FL 34698

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3502406

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCAVUZZO, SHARON E  
1642 HOBBIT RD.  
DUNEDIN FL 34698

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP ☐ Delete  
NAME AMES, SUZANNE  
STREET ADDRESS 1724 GROVE LEAF  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME RAO, BRUCE  
STREET ADDRESS 1831 NUTHATCH WAY  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME PATTERSON, LESLIE  
STREET ADDRESS 711 FAIRWOOD LANE  
CITY-ST-ZIP CLEARWATER FL 33759

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE OTD ☒ Delete  
NAME MCMAHON, MAC  
STREET ADDRESS 3701 SILVER LAKE DR.  
CITY-ST-ZIP KISSIMEE FL 34744

TITLE ☐ Change ☒ Addition  
NAME TERRY O'REILLY  
STREET ADDRESS Director of Training  
CITY-ST-ZIP 1188 BASS BLVD.  
Dunedin, FL 34698

TITLE P ☐ Delete  
NAME CLARK, ROBERT  
STREET ADDRESS 2733 STARLITE LANE  
CITY-ST-ZIP PORT CHARLOTTE FL 33952

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DOT ☐ Delete  
NAME AKENHURST, STEVE  
STREET ADDRESS 1119 SEAGULL LANE  
CITY-ST-ZIP GULFPORT FL 33707

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Sharon E. Scavuzzo* Founder & Dir. of Operations 3/15/02 727-722-4199

CR2E037 (9/01)

005456

FILED  
Mar 29, 2002 8:00 am  
Secretary of State

03-29-2002 91429 010 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE