

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004905

FILED
Mar 23, 2009
Secretary of State

Entity Name: AMERICAN SEALYHAM TERRIER CLUB, INC.

Current Principal Place of Business:

26 ACADEMY ST
ALBION, PA 16401

New Principal Place of Business:

Current Mailing Address:

26 ACADEMY ST
ALBION, PA 16401

New Mailing Address:

FEI Number: 16-6066943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER & ANSLEY P A
J JEROME MILLER
415 MOUNTAIN DRIVE, SUITE 3
DESTIN, FL 325412349 US

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: P () Delete
Name: YARD, SHARON
Address: 14111 REHOBOTH CH RD
City-St-Zip: LOVETTSVILLE, VA 20180

Title: VP () Delete
Name: MILLER, JEROME
Address: 91 BAYWIND DR
City-St-Zip: DESTIN, FL 32541

Title: T () Delete
Name: JOHNSTON, MARIE
Address: 5340 HOLMES RUN PKWY APT 104
City-St-Zip: ALEXANDRIA, VA 22304

Title: CS () Delete
Name: PERRY, DIANA
Address: 40 ACADEMY STREET
City-St-Zip: ALBION, PA 164011002

Title: RS () Delete
Name: BAY, KAREN
Address: 10153 W MARLOWE PL
City-St-Zip: LITTLETON, CO 80127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MADER, KEN
Address: 1453 COUNTRY CLB DR. NE
City-St-Zip: PALM BAY, FL 32905

Title: TREA (X) Change () Addition
Name: JOHNSTON, MARIE
Address: 5340 HOLMES RUN PKWY APT 104
City-St-Zip: ALEXANDRIA, VA 22304

Title: CSEC (X) Change () Addition
Name: PERRY, DIANA
Address: 26 ACADEMY STREET
City-St-Zip: ALBION, PA 164011002

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DIANA M. PERRY

SECY

03/23/2009

Electronic Signature of Signing Officer or Director

Date