

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000029166

FILED
Apr 30, 2003
Secretary of State

Entity Name: BREEDERS DIRECT, INC.

Current Principal Place of Business:

3910 N.W. 49TH STREET
TAMARAC, FL 33309

New Principal Place of Business:

Current Mailing Address:

3910 N.W. 49TH STREET
TAMARAC, FL 33309

New Mailing Address:

FEI Number: 65-0983234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNN, KENNETH J ESQ.
11575 HERON BAY BLVD.
SUITE 309
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

WALDEN, LINDA J
1489 WEST PALMETTO PARK ROAD
SUITE 400
BOCA RATON, FL 33486 US

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: JAMES M. SCHWINN

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUCKEY, DANIEL L
Address: 3910 NW 49TH STREET
City-St-Zip: TEMERCE, FL 33309

Title: VP () Delete
Name: BUCKEY, DANIEL J
Address: 3910 NW 49TH STREET
City-St-Zip: TEMERCE, FL 33309

Title: S () Delete
Name: SCHARMER, MICHELLE
Address: 3910 NW 49TH STREET
City-St-Zip: TEMERCE, FL 33309

Title: VP (X) Delete
Name: SCHWENN, CYNTHIA
Address: 5511 SW 7TH STREET
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BUCKEY, DANIEL L
Address: 3910 NW 49TH STREET
City-St-Zip: TAMARAC, FL 33309

Title: VP (X) Change () Addition
Name: SCHWINN, JAMES M SR.
Address: 3910 NW 49TH STREET
City-St-Zip: TAMARAC, FL 33309

Title: S (X) Change () Addition
Name: SCHARMER, MICHELLE
Address: 3910 NW 49TH STREET
City-St-Zip: TAMARAC, FL 33309

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES M. SCHWINN

VP

04/30/2003

Electronic Signature of Signing Officer or Director

Date