

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90142 045 ***150.00

0644937 AT

DOCUMENT # P00000109572

1. Entity Name

**THE FEDERATION OF ASSOCIATIONS OF BREEDERS OF TH
E P.R.E. IN THE UNITED STATES, INC.**



Principal Place of Business
**101 CAMOUSTRE NORTH
BIRMINGHAM AL 35242**

Mailing Address
**101 CAMOUSTRE NORTH
BIRMINGHAM AL 35242**

2. Principal Place of Business

5950 EDMONDSON PK

3. Mailing Address

5950 EDMONDSON PK

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NASHVILLE, TN

City & State

NASHVILLE, TN

Zip

37211

Country

USA

Zip

37211

Country

U.S.A

4. FEI Number

62-0893865

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DALE, JERRY M ESQ
LAW OFFICES OF JERRY M. DALE, P.A.
8370 WEST FLAGLER STREET SUITE 252
MIAMI FL 33144**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ **\$5.00 May Be
Trust Fund Contribution. Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **JENKINS, KAREN**
STREET ADDRESS **5950 EDMONDSON PIKE**
CITY-ST-ZIP **NASHVILLE TN 37211**

TITLE **STD** ☐ Delete
NAME **DENHAM, BEVERLY**
STREET ADDRESS **11788 ZACKERY ROAD**
CITY-ST-ZIP **AUBREY TX 76227**

TITLE **VD** ☒ Delete
NAME **CURRIE, BARBARA**
STREET ADDRESS **28780 WAGON ROAD**
CITY-ST-ZIP **AGOURA CA 91301**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE **VD** ☒ Change ☐ Addition
NAME **TERRI MEADOR**
STREET ADDRESS **4021 CORBIN ROAD**
CITY-ST-ZIP **DENTON, TX 7**

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

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

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 607, 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: **Karen A. Jenkins, Pres** **4/20/03** **615-832-5471**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **352-402-0066**

CR2E034 (10/02)