


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90080 035 ***150.00

DOCUMENT # P01000043365	
1. Entity Name JERSEY DOGS, INC.	

Principal Place of Business JERSEY DOGS, INC 32 75TH AVE. SAINT PETERSBURG, FL 33706	Mailing Address JERSEY DOGS, INC 32 75TH AVE. SAINT PETERSBURG, FL 33706
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2. Principal Place of Business 432 75th AVE.	3. Mailing Address SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ST. Pete Beach, FL	City & State SAME
Zip 33706	Zip 33706
Country Pinellas	Country USA



01052005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3725767		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent SHAW, PEGGY 6100 GULFPORT BLVD., APT 217 SAINT PETERSBURG, FL 33707		
7. Name and Address of New Registered Agent Name Pulis, Peggy (New Married Name) Street Address (P.O. Box Number is Not Acceptable) 8270 30th Ave. NO. City ST Petersburg FL Zip Code 33710		

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, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O PULIS, PEGGY 6100 GULFPORT BLVD, APT 217 SAINT PETERSBURG, FL 33707 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pulis, Peggy, President 8270 30th Ave. NO. SAINT Petersburg, FL 3310 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Peggy A. Pulis, President* *Feb. 28, 2005* *727.686.4251*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40026216

Department of Health • Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
 TYPE IN UPPER CASE
 USE BLACK INK

P01000043365

(STATE FILE NUMBER)

This license not valid unless seal of Clerk,
 Circuit or County Court, appears thereon.

03-376110 SPT- 4-2003 3:16PM
 PINELLAS CO BK 13041 PG 2078

1037522

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) KENNETH GEORGE PULIS		2. DATE OF BIRTH (Month, Day, Year) 10/26/1946	
3a. RESIDENCE - CITY, TOWN, OR LOCATION SOUTH PASADENA	3b. COUNTY PINELLAS	3c. STATE FL	4. BIRTHPLACE (State or Foreign Country) NEW JERSEY
5. BRIDE'S NAME (First, Middle, Last) PEGGY SUE SHAW		6. DATE OF BIRTH (Month, Day, Year) 12/10/1950	
7a. RESIDENCE - CITY, TOWN, OR LOCATION SOUTH PASADENA	7b. COUNTY PINELLAS	7c. STATE FL	8. BIRTHPLACE (State or Foreign Country) VIRGINIA

WE THE APPLICANTS NAMED IN THIS CERTIFICATE EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name using black ink) <i>Kenneth George Pulis</i>	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 08/20/2003
11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink) <i>James Dooley</i>
13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>Peggy Sue Shaw</i>	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) 08/20/2003
15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink) <i>James Dooley</i>

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE PINELLAS	18. DATE LICENSE ISSUED 08/20/2003	18a. DATE LICENSE EFFECTIVE 08/23/2003	19. EXPIRATION DATE 10/22/2003
20a. SIGNATURE OF COURT CLERK OR JUDGE <i>Karleen F. DeBlaker</i>		20b. TITLE CLERK OF CIRCUIT COURT	20c. BY D.C. <i>jsd</i>

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) 8/30/03	22. CITY, TOWN, OR LOCATION OF MARRIAGE St. Pete Beach FL 33706
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>[Signature]</i>	23c. ADDRESS (Of person performing ceremony) 6200 Gulf Blvd. SDB FL 33706
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) My Commission D0000174 Expires January 23, 2008	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>[Signature]</i>
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>[Signature]</i>

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED



STATE OF FLORIDA, PINELLAS COUNTY

I hereby certify that the foregoing is a true copy as the same appears among the files and records on this date.

This day of **SEP** 20**03**

KARLEEN F. DEBLAKER
 Clerk of Circuit Court

By: *[Signature]*
 Deputy Clerk