

FILED
Jun 17, 2002 8:00 am
Secretary of State

05-28-2002 90729 048 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 701000112578 ✓
1. Entity Name
YARD DOG, INC.

DO NOT WRITE IN THIS SPACE

93234

2. Principal Place of Business
3605 MARSH AVE
Suite, Apt. #, etc.

3. Mailing Address
3605 MARSH AVE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ORLANDO FL
Zip
32806 Country

City & State
ORLANDO, FL
Zip
32806 Country

4. FEI Number
03-0379697 Applied For
Not Applicable

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
O'BRIEN NEILL LTD
Street Address (P.O. Box Number is Not Acceptable)
140 NORTH ORLANDO AVE STE 150
WINTER PARK FL 32789
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 fee if applicable.

(NOTE: Registered Agent signature required when redesigning)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D. KURAWSKY, NEIL T
3605 MARSH AVE
ORLANDO, FL 32806

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D. KURAWSKY, THOMAS E.
3605 MARSH AVE
ORLANDO, FL 32806

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D. KURAWSKY, JANET L.
3605 MARSH AVE
ORLANDO, FL 32806

TITLE
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS E. KURAWSKY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/09/02 407-851-5532
Date Daytime Phone