

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Mar 06, 2003 8:00 am  
Secretary of State

03-06-2003 90103 022 \*\*\*150.00

DOCUMENT # P02000033450

1. Entity Name

GROOMINGTAILS PET RESORT & SPA, INC.



Principal Place of Business

1255 MASON AVE.  
DAYTONA BEACH FL 32117

Mailing Address

1255 MASON AVE.  
DAYTONA BEACH FL 32117

2. Principal Place of Business

307 Seabreeze Blvd  
Suite, Apt. #, etc.

3. Mailing Address

307 Seabreeze Blvd  
Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES

City & State

Daytona Bch, FL  
Zip 32118 Country USA

City & State

Daytona Bch, FL  
Zip 32118 Country USA

4. FEI Number

04-3636224

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name RICHARD K. CHURCHMAN CPA  
Street Address (P.O. Box Number is Not Acceptable)  
1255 MASON AVENUE  
City DAYTONA BEACH FL Zip Code 32118

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 *Richard K. Churchman*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-8-03

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 Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME PTD  
STREET ADDRESS TILLIS, DANIEL L  
CITY-ST-ZIP 1255 MASON AVE.  
DAYTONA BEACH FL 32117  Delete

TITLE NAME  Change  Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME VSD  
STREET ADDRESS TILLIS, JENNIFER L  
CITY-ST-ZIP 1255 MASON AVE.  
DAYTONA BEACH FL 32117  Delete

TITLE NAME  Change  Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  Change  Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE NAME  Change  Addition  
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:

*Jennifer Tillis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/2/03 386-258-

Daytime Phone #

7297

CR2E034 (10/02)