

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90126 019 ***150.00

DOCUMENT # **P93000043313**

1. Entity Name
CAHILL & O'CONNOR KENNEL, INC.



Principal Place of Business *8081 N.W. Lily County Line Rd.*
~~265 MT. PANAY AVENUE NE~~
~~SAINT PETERSBURG FL 33702~~
US *One, Fla 33865*

2. Principal Place of Business
8081 N.W. Lily County Line Rd.

Suite, Apt. #, etc.

City & State
One, Fla

Zip
33865

Country
Desota

6. Name and Address of Current Registered Agent

FERGUSON, DARL D
2000 N. CONGRESS AVE.
208
WEST PALM BEACH FL 33409

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 _____ (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
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **CAHILL, TIMOTHY D** *8081 N.W. Lily County Line Rd.*
STREET ADDRESS ~~10901 BRIGHTON BAY BLVD NE #7101~~ *One, Fla*
CITY-ST-ZIP ~~SAINT PETERSBURG FL 33746~~ *33865*

TITLE **VP Sec**
NAME **O'CONNOR, CYNTHIA K** *8081 N.W. Lily County Line Rd.*
STREET ADDRESS ~~10901 BRIGHTON BAY BLVD NE #7101~~ *One, Fla*
CITY-ST-ZIP ~~SAINT PETERSBURG FL 33746~~ *33865*

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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: *Cynthia K O'Connor*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-13-03 *863-993-2077*
Date Daytime Phone #

CR2EN34 (10/02)