## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

P93000043313 **DOCUMENT #** 

1. Entity Name

CAHILL & O'CONNOR KENNEL, INC.



Apr 16, 2003 8:00 am Secretary of State 04-16-2003 90126 019 \*\*\*150.00

		A length		رام ا	
205-MT-PANE	ce of Business 8081 Th. W.L.Ly Chur Y AVENUE NE 38URG FL 33702	Mailing Address 8087 70 -205 MT PANEY AVENUE NE -SAINT PETERSBURG FL 33		71 m	
	Ona. Fla 33845		3865		
บร	Ona. Pla 33843	us Unac. Plac 3	200-		
2. Principal F	Place of Business W Lily County Line RD	3. Mailing Address 9881 N.W.LiLy C	bunty line Rio		Bio 18 (1196 1119) 1160 0 1111 1681
Suite, Apt.		Suite, Apt. #, etc.		CHECK HERE IF MAKIN	G CHANGES
City & Stat	te . Fla	City & State	Fla	4. FEI Number 65-0425871	Applied For
Zip	Country	<u>Dha</u>	-Country-		Not Applicable -\$8.75 Additional
33865	Desota	33865	Desoto	5. Certificate of Status Desired	Fee Required
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registered	Agent
CEDOLIAA	W DADI D		Name	•	
FERGUSON, DARL D			Street Address (P.O. Box Number is Not Acceptable)		
2000 N. CONGRESS AVE.			ļ		<del></del>
# 208			J		ļ
WEST PAL	LM BEACH FL 33409		City	F	Zip Code
8. The above	e named entity submits this statement for t	the purpose of changing its re	egistered office or registe	ered agent, or both, in the State of Florida. I an	
	tions of registered agent.	no perpensional group	9	39011 3, 3311 ,, 113 311 311 311 311 311 31	The state of the s
CIONATURE	;				
SIGNATURE	Signature typed of printed name of registered agent and	d title if applicable. (NOTE:	Registered Agent signature require	ed when reinstating) DATE	
	ILE NOW! FEE IS \$150.00				
	r May 1, 2003 Fee will be \$550.00			S. Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees
Make Check	k Payable to Florida Department of S	State *		Trust Fund Contribution.	Added to Fees
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 11
TITLE	P	Delete	TITLE		☐ Change ☐ Addition
NAME	CAHILL, TIMOTHY D 808/ Y) 4		<b>4</b> '		
STREET ADDRESS CITY-ST-ZIP	10901 BRIGHTON BAY BLVD NE # SAINT PETERSBURG FL-33716-	7101 One 1140 33865	STREET ADDRESS CITY-ST-ZIP		,
TITLE -	VA Sec	□ Paleta	STITLE OF A		Change Addition
NAME	OCONNOR, CYNTHIA K 808/71	whily County I	PAME Pd.		Change C Action (
STREET ADDRESS	10901 BRIGHTON BAY BLVD NE #	7101 <i>10 me</i>	STREET ADDRESS		
CITY-ST-ZIP	SAINT PETERSBURG FL 33718	F/a_33865	CITY-ST-ZIP	or a second of the second	
TITLE		Delete	TITLE		Change  Addition
NAME			NAME		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
	<del>                                     </del>		<b>-</b>		C Charles C Addition
TITLE NAME		☐ Delete	TITLE NAME		Change Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME	}	-	NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
	Certify that the information supplied with the	nis filino does not qualify for th	┸──┴──	ection 119.07(3)(i), Florida Statutes. I further ci	ertify that the information
indicated of the cor	on this report or supplemental report is tr	rue and accurate and that my ered to execute this report as	signature shall have the	e same legal effect as if made under oath; that 17, Florida Statutes; and that my name appears	am an officer or director