

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000049426

1. Entity Name

PALM BEACH GREYHOUND KENNELS ASSOC., INC.

Principal Place of Business

1111 N CONGRESS AVENUE  
WEST PALM BEACH FL 33409  
US

Mailing Address

5340 NW 2ND AVENUE  
A-530  
BOCA RATON FL 33487  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0425659

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AGGANIS, ARTHUR  
5340 NW 2ND AVENUE  
A-530  
BOCA RATON FL 33487

Name

Street Address (P.O. Box Number is Not Acceptable)

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME AGGANIS, ARTHUR W  
STREET ADDRESS 5340 NW 2ND AVENUE, A-530  
CITY-ST-ZIP BOCA RATON FL 33487 ☐ Delete

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

TITLE S  
NAME MARIOTT, MICHELLE  
STREET ADDRESS 10648 MISTY LANE  
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☒ Delete

TITLE S  
NAME MARIAM DOUGLAS  
STREET ADDRESS 1161 NEW PARKVIEW PL  
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Change ☒ Addition

TITLE VP  
NAME JAMES DOUGLAS,  
STREET ADDRESS 1161 NEW PARKVIEW PLACE  
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Delete

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

TITLE S  
NAME WILLIAM T. DAVIDSON,  
STREET ADDRESS 1074 FERNLEA DR.  
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

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

TITLE D  
NAME PERKINS, STEVE  
STREET ADDRESS 10648 MISTY LANE  
CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☒ Delete

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

TITLE D  
NAME MCLENNON, BERNIE  
STREET ADDRESS 1244 - 12TH FAIRWAY  
CITY-ST-ZIP WELLINGTON FL 33414 ☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE *Arthur Agganis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
Jan 08, 2002 8:00 am  
Secretary of State

01-08-2002 90025 037 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

0405575 AV

CR2E034 (9/01)

Jan 3 2002 561-994-3635