2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2002 8:00 am
Secretary of State
05-17-2002 90013 012 ***150.00

DOCUMENT # P97000036212

1. Entity Name
VILLAGE GROOMING OF PINELLAS, INC.

Principal Place of Business	Mailing Address
12609 ULMERTON ROAD LARGO FL 33774	12609 ULMERTON ROAD LARGO FL 33774

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
14680 118th AVE		14680 118th AVE	
Suite, Apt. #, etc. SUITE #4		Suite, Apt. #, etc. SUITE #4	
City & State LARGO, FL.		City & State LARGO, FL.	
Zip 33774	Country PINELLAS	Zip 33774	Country PINELLAS

4. FEI Number 59-3444742 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RICHARDSON, TERRY W
12609 ULMERTON ROAD
LARGO FL 33774

7. Name and Address of New Registered Agent

Name ~~RICHARDSON, TERRY W~~ TR
Street Address (P.O. Box Number is Not Acceptable) ~~14680 118th AVE Unit #4~~ TR
~~LARGO~~ TR
City FL Zip Code 33774

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 NAME STREET ADDRESS CITY-ST-ZIP	PVPS RICHARDSON, TERRY 12473 136TH LN N LARGO FL 33774	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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: Terry W Richardson 4-24-02 727-593-3557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)