

ANNUAL REPORT

DOCUMENT # P99000054544

1. Entity Name  
THE MIDDLEBURG KENNEL, INC.



FILED  
Jan 30, 2008 08:00 AM  
Secretary of State

Principal Place of Business  
2251 S DOLPHINE AVE  
MIDDLEBURG, FL 32068

Mailing Address  
2251 S DOLPHINE AVE  
MIDDLEBURG, FL 32068



01182008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3632937 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KICKLIGHTER, PAMELA H  
2251 S DOLPHINE AVE  
MIDDLEBURG, FL 32068

**DO NOT WRITE IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

000000804520  
02/05/09-80074-025 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KICKLIGHTER, PAMELA H. 2251 S DOLPHINE AVE MIDDLEBURG, FL 32068
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TITLE NAME 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 exemptions contained in Chapter 119, 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: *Pamela H. Kicklighter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-08 904-291-1331  
Date Daytime Phone #