

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001553

**Entity Name:** TAILWAGGERS LEARNING CENTER O.T.C. OF SOUTH FLORIDA, INC.

**FILED**  
**Jan 09, 2018**  
**Secretary of State**  
**CC3317892205**

**Current Principal Place of Business:**

3200 N MILITARY TRAIL  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

634 DAVIS RD  
DELRAY BEACH, FL 33445

**FEI Number: 65-0488705**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

DOBRICK, PHYLLIS  
634 DAVIS RD  
DELRAY BEACH, FL 33445 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	VP	Title	PRESIDENT
Name	DEZENDORF, MAITE	Name	PAPCIAK, WAYNE
Address	11319 57TH RD NORTH	Address	18265 93RD RD N
City-State-Zip:	ROYAL PALM BEACH FL 33411	City-State-Zip:	LOXAHATCHEE FL 33470
Title	TREASURER	Title	SECRETARY
Name	DOBRICK, PHYLLIS	Name	HINSON, JOYCE
Address	634 DAVIS RD	Address	147 WANDERING TRAIL
City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	JUPITER FL 33458

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PHYLLIS DOBRICK**

**TREASURER**

**01/09/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date