FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 712132 (0)

1. Corporation Name
FLORIDA WALKING AND RACKING HORSE ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
4925 UNIV AVE LEESBURG FL 34748 US	4925 UNIV AVE LEESBURG FL 34748 US

3. Date Incorporated or Qualified: **01/23/1967**
3a. Date of Last Report: **04/18/1995**

2. Principal Place of Business
21 6037 CRESTVIEW DR
22 Suite, Apt. #, etc.
23 City & State: BROOKSVILLE FL.
24 Zip: 34602 25 Country: HERNANDO

2a. Mailing Address
26 6037 CRESTVIEW DR.
27 Suite, Apt. #, etc. SAME
28 City & State
29 Zip 30 Country

4. FEI Number: **59-1574599** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CASTELLOW, CINDY
1504 48TH AVE W
PALMETTO FL 34221

10. Name and Address of New Registered Agent

81 Name: BRICE EHRICH
82 Street Address (P.O. Box Number is Not Acceptable): 6307 CRESTVIEW DR
83
84 City: BROOKSVILLE FL 85 Zip Code: 34602

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: X B Sue Ehrich 2-25-96
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SCHROEDER, JEFF PO BOX 222 N/A OKAHUMPKA FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	S OLIVE EHRICH 27378 RZENA LOOP BROOKSVILLE FL. 34602	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AQUIRRE, MARGO 1260 GARDEN ROAD FT LAUDERDALE FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	V PAM GREENE 4506 S. EDWARDS Rd PLANT CITY, FL 33567	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SIPE, GAYE 11037 SIPE LANE HOWEY IN THE HILL FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D JEANNAE PATTERSON 4905 Nimay! MIMS, FL 32754	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, DON 4925 UNIVERSITY DRIVE LEESBURG FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D JIM PERCOCK 9510 36th AVE EAST PALMETTO, FL. 34221	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DINSFRIEND, DEE PO BOX 7 BUSHNELL FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MONAHRN, DENISE 5110 WOODLAWN CIR E PALMETTO FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dee Dinsfriend 2/21/96 352-583-5060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #