

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42305

FILED
Mar 22, 2007
Secretary of State

Entity Name: SHERIFF'S EQUESTRIAN ASSOCIATION, INC.

Current Principal Place of Business:

3445 RUSTIC ROAD
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

C/O THEA RHODES, PRESIDENT
262 N. AUBURN ROAD
VENICE, FL 34292

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDS, H. VERNON
165 W GREEN ST
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RHODES, THEA
Address: 262 N AUBURN RD
City-St-Zip: VENICE, FL 34292

Title: VD () Delete
Name: PONELEIT, MARGIE
Address: 235 KEYSTONE
City-St-Zip: VENICE, FL 34292

Title: SD () Delete
Name: WRIGHT, LYNN
Address: 7198 WESTWOOD WAY
City-St-Zip: SARASOTA, FL 34241

Title: TD () Delete
Name: BALLARD, JULIA M
Address: 525 N. HAVANA RD.
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: GREER, DEBBY
Address: 2365 COWPEN LANE
City-St-Zip: SARASOTA, FL 34240

Title: D () Delete
Name: SCHULE, SALLY
Address: 7509 49TH AVE. E.
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ROWLEY, CHERYL
Address: 734 MORNINGSIDE DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: SD (X) Change () Addition
Name: BABBITT, TED
Address: 508 BAYSIDEWAY
City-St-Zip: NOKOMIS, FL 34275

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BRANTLEY, NANCY
Address: 5027 SOUTHERNPINE CIRCLE
City-St-Zip: VENICE, FL 34293

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHERYL L ROWLEY

VD

03/22/2007

Electronic Signature of Signing Officer or Director

_____ Date