2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# N97000004874

Entity Name: THE FLORIDA THOROUGHBRED BREEDERS' AND OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

801 SW 60TH AVENUE
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

801 SW 60TH AVENUE
OCALA, FL 34474

New Mailing Address:

FEI Number: 59-0944678 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANCOCK, RICHARD E
801 SW 60TH AVENUE
OCALA, FL 34474 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: P ( ) Delete
Name: DIZNEY, DONALD R
Address: 603 MAIN STREET
City-St-Zip: WINDERMERE, FL 34786

Title: S ( ) Delete
Name: ROBERTS, MARK
Address: 14216 N US HWY 27
City-St-Zip: OCALA, FL 34482

Title: 2VPD ( ) Delete
Name: DERENZO, DEAN J
Address: 6500 NW HWY 225A
City-St-Zip: OCALA, FL 34482

Title: T ( ) Delete
Name: CASSE, NORMAN E
Address: P.O. BOX 729
City-St-Zip: SPARR, FL 32192

Title: VPD ( ) Delete
Name: CAMPBELL, GILBERT G
Address: P.O. BOX 381
City-St-Zip: TYNGSBORO, MA 01879

Title: ED ( ) Delete
Name: HANCOCK, RICHARD E
Address: 801 SW 60TH AVE
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: RICHARD E HANCOCK ED 04/18/2006

Electronic Signature of Signing Officer or Director Date