

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761362

**Entity Name:** VINCEREMOS RIDING CENTER, INC.**Current Principal Place of Business:**13300 6TH COURT N  
LOXAHATCHEE, FL 33470**Current Mailing Address:**13300 6TH COURT N  
LOXAHATCHEE, FL 33470**FEI Number:** 59-2274451**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARTER, WILLIAM J.  
13300 SIXTH COURT NORTH  
LOXAHATCHEE, FL 33470 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:** WILLIAM J. CARTER

05/26/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name COPPOLA, JESSE MS.  
Address 13479 FOUNTAIN VIEW BLVD  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name SMITH, CHARLOTTE WMRS.  
Address 7342 PINE PARK DR.  
City-State-Zip: LAKE WORTH FL 33467

Title VP  
Name HADDEN, PATTI MRS.  
Address 4045 GEM LAKE DR  
City-State-Zip: WEST PALM BEACH FL 33409

Title TREASURER  
Name CARROLL, STEVE RMR.  
Address 20236 BACK NINE DRIVE  
City-State-Zip: BOCA RATON FL 33498

Title DIRECTOR  
Name MARSCHOK, EMILY RMS.  
Address 11955 POLO CLUB RD  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name RICHARDSON, BARBRA MRS.  
Address 1335 LAKE BREEZE  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name SYBEN, LEE  
Address 19746 BLACK FALCON RD.  
City-State-Zip: LOXHAHATCHEE FL 33470

Title PRESIDENT  
Name MILLER, ELLIN  
Address 11279 OLD HARBOR  
City-State-Zip: NORTH PALM BEACH FL 33408

**Continues on page 2**

*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:** WILLIAM G. CARTERCHIEF EXECUTIVE  
OFFICER

05/26/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SWERDLIN, SCOTT  
Address 13125 SOUTHFIELDS RD.  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name KANE, TERI  
Address 3000 BENT CYPRESS RD  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name SHAUGHNESSY, DENNIS  
Address 11928 MAIDSTONE DR  
City-State-Zip: WELLINGTON FL 33414

Title SECRETARY  
Name PAGE, ARLENE  
Address 11730 MAIDSTONE DR  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name FRANKHOUSER, LEE  
Address 1314 GREENVIEW SHORES  
City-State-Zip: WELLINGTON FL 33414

Title CEO  
Name CARTER, WILLIAM G.  
Address 5280 N. OCEAN BLVD  
APT 6D  
City-State-Zip: RIVIERA BEACH FL 33404