

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010129

FILED
Feb 08, 2019
Secretary of State
6571123725CC

Entity Name: OCALA THOROUGHBRED RACING, INC.

Current Principal Place of Business:

801 SW 60TH AVENUE
OCALA, FL 34474

Current Mailing Address:

801 SW 60TH AVENUE
OCALA, FL 34474

FEI Number: 45-2395614

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWELL, LONNY T
801 SW 60TH AVENUE
OCALA, FL 34474 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 SECRETARY
Name BREI, FRED
Address 7600 NW 120TH STREET
City-State-Zip: REDDICK FL 32686

Title TREASURER, DIRECTOR
Name O'FARRELL, JR, JOSEPH M
Address P.O. BOX 818
City-State-Zip: OCALA FL 34478

Title PRESIDENT, CHAIRMAN
Name FERNUNG, BRENT
Address 5571 NW 100TH STREET
City-State-Zip: OCALA FL 34482

Title DIRECTOR
Name RUSSELL, GEORGE L SR.
Address 12010 NW HIGHWAY 225A
City-State-Zip: REDDICK FL 32686

Title EXECUTIVE VICE PRESIDENT
Name POWELL, LONNY T
Address 801 SW 60TH AVENUE
City-State-Zip: OCALA FL 34474

Title VP, DIRECTOR
Name MATTHEWS DVM, PHILIP
Address 9420 S MAGNOLIA AVE
City-State-Zip: OCALA FL 34476

Title DIRECTOR
Name ROGERS, MICHAEL
Address MAGNA ENTERTAINMENT
14875 BAYVIEW AVENUE
City-State-Zip: AURORA L4G3G8

Title DIRECTOR
Name DAILEY, VALERIE
Address 5780 SW 20TH ST
City-State-Zip: OCALA FL 34474

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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: LONNY POWELL

CEO

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KOSANOVICH, MILAN
Address BROKEN BACK FARM
 901 SW 73RD ST RD
City-State-Zip: OCALA FL 34476-6877

Title DIRECTOR
Name ISAACS, GEORGE
Address BRIDLEWOOD FARM
 8318 NW 90TH TERRACE
City-State-Zip: OCALA FL 34482