Entity Name: GULFSTREAM PARK THOROUGHBRED AFTER RACING PROGRAM, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**Current Principal Place of Business:** 

3051 NE 213TH STREET AVENTURA, FL 33180

### **Current Mailing Address:**

901 S. FEDERAL HIGHWAY 4TH FLOOR EXECUTIVE OFFICES HALLANDALE BEACH, FL 33009 US

### FEI Number: 45-2466591

#### Name and Address of Current Registered Agent:

FUCHECK, MICHAEL W 901 S. FEDERAL HIGHWAY 4TH FLOOR EXEC OFFICES HALLANDALE BEACH, FL 33009 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:	MICHAEL W. FUCHECK			05/31/201	
	Electronic Signature of Registered Agent			Date	
Officer/Direct	or Detail :				
Title I	D	Title	VP, SECRETARY		
Name	CLARK, STACIE	Name	ROGERS, MICHAEL		
Address	901 S FEDERAL HWY	Address	901 S FEDERAL HWY		
City-State-Zip: I	HALLANDALE BEACH FL 33009	City-State-Zip:	HALLANDALE BEACH FL 33009		
Title	DIRECTOR	Title	PRESIDENT		
Name	OSSIP, ALON	Name	RITVO, TIM		
Address	901 S FEDERAL HWY	Address	901 S FEDERAL HWY		
City-State-Zip: I	HALLANDALE BEACH FL 33009	City-State-Zip:	HALLANDALE BEACH FL 33009		
Title	D	Title	D		
Name I	MATTHEWS, PHILIP	Name	BREI, FRED		
Address	9430 S. MAGNOLIA AVE	Address	7600 NW 120TH ST		
City-State-Zip:	OCALA FL 34476	City-State-Zip:	REDDICK FL 32686		
Title	DIRECTOR	Title	DIRECTOR		
Name I	FERNUNG, BRENT	Name	O'FARRELL, MICHAEL		
Address	901 S. FEDERAL HWY	Address	901 S. FEDERAL HWY		
City-State-Zip: I	HALLANDALE BEACH FL 33009	City-State-Zip:	HALLANDALE BEACH FL 33009		

## 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: PJ CAMPO

GENERAL MANAGER 05/31/2016

Electronic Signature of Signing Officer/Director Detail

# Certificate of Status Desired: No

FILED May 31, 2016 Secretary of State CC6929736371

DOCUMENT# N11000003398

Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	т
Name	WALKER, FRANK JR.	Name	CAMPO, PJ
Address	901 S. FEDERAL HWY	Address	901 S FEDERAL HWY
City-State-Zip:	HALLANDALE BEACH FL 33009	City-State-Zip:	HALLANDALE BEACH FL 33009