

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002941

FILED
Apr 14, 2014
Secretary of State
CC5827473013

Entity Name: JUPITERFARMS HORSEMEN'S ASSOCIATION, INC.

Current Principal Place of Business:

167 SAND PINE DR.
JUPITER, FL 33477

Current Mailing Address:

P.O. BOX 2613
JUPITER, FL 33458

FEI Number: 65-0672042

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAFAROW, LINDA
167 SAND PINE DRIVE
JUPITER, FL 33477 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: LINDA SHAFAROW

04/14/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WILLIAMS, RAY
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title VP
Name MILLER, JESSICA
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title TREASURER
Name SHAFAROW, LINDA MRS
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title SECRETARY
Name WILLIAMS, PAM
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name JOHN, CLAUDIA
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name MEYERS, SUNI
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name DRURY, LESLIE
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

Title DIRECTOR
Name HAMILTON, CATERINA MRS
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458

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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: LINDA SHAFAROW

TREASURER

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CROUSE, MIRANDA
Address P.O. BOX 2613
City-State-Zip: JUPITER FL 33458