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

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

801 SW 60TH AVENUE OCALA, FL 34474

Current Mailing Address:

DOCUMENT# N97000004874

801 SW 60TH AVENUE OCALA, FL 34474

FEI Number: 59-0944678

Name and Address of Current Registered Agent:

POWELL, LONNY T 801 SW 60TH AVENUE OCALA, FL 34474 US Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :				
	Title	SECRETARY, DIRECTOR	Title	1VP, DIRECTOR
	Name	O'FARRELL, JOSEPH M III	Name	FERNUNG, BRENT
	Address	PO BOX 818	Address	5571 NW 100TH STREET
	City-State-Zip:	OCALA FL 34478	City-State-Zip:	OCALA FL 34482
	Title Name Address	SECOND VICE PRESIDENT, DIRECTOR MATTHEWS, DVM, PHIL 9420 S MAGNOLIA AVE	Title Name Address City-State-Zip:	CEO POWELL, LONNY T 801 SW 60TH AVE OCALA FL 34474
	City-State-Zip:	OCALA FL 34476	Title	DIRECTOR
	Title	PRESIDENT, DIRECTOR	Name	BARBAZON, JOE
	Name Address	SSELL, GEORGE L SR. 10 NW HIGHWAY 225A	Address	PLEASANT ACRES FARM 2153 SE HIGHWAY 41
	City-State-Zip:	REDDICK FL 32686	City-State-Zip:	MORRISTON FL 32668
	Title	DIRECTOR	Title	TREASURER, DIRECTOR
	Name	LERMAN, ROY S	Name	BREI, FRED
	Address	LAMBHOLM SOUTH P O BOX 670	Address	JACKS OR BETTER FARM 7600 NW 120TH STREET
	City-State-Zip:	FAIRFIELD FL 32634	City-State-Zip:	REDDICK FL 32686

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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: I	ONNY POWELL	CEO	03/26/2015

Electronic Signature of Signing Officer/Director Detail

FILED Mar 26, 2015 Secretary of State CC3976688831

Date

Date

Officer/Director Detail Continued :

	Title	DIRECTOR	Title	DIRECTOR
	Name	PARKS, DIANE	Name	WEBER, CHARLOTTE C
	Address	P O BOX 770038	Address	LIVE OAK STUD 9275 SW 9TH STREET ROAD
	City-State-Zip:	OCALA FL 34482	City-State-Zip:	OCALA FL 34481
	Title	DIRECTOR	Title	DIRECTOR
	Name	WHEELER, GREG	Name	BERKELHAMMER, BARRY
	Address	10137 NW 19TH PLACE	Address	ABRACADABRA FARM
	City-State-Zip:	OCALA FL 34482		510 SE HIGHWAY 484
	Title	DIRECTOR	City-State-Zip:	OCALA FL 34480
	Name	CAMPBELL, GILBERT	Title	DIRECTOR
	Address	PO BOX 381	Name	ISAACS, GEORGE
	City-State-Zip:	TYNGSBORO MA 01879	Address	BRIDLEWOOD FARM 8318 NW 90TH TERRACE
	Title	DIRECTOR	City-State-Zip:	OCALA FL 34482
	Name	KOSANOVICH, MILAN	Title	DIRECTOR
	Address	BROKEN BACK FARM 901 SW 73RD ROAD	Name	STEINBRENNER, JESSICA
	City-State-Zip:	te-Zip: OCALA FL 34476	Address	KINSMAN FARM 3727 SW 95TH AVE ROAD
			City-State-Zip:	OCALA FL 34481