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

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

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2013 Secretary of State CC7248902963

Date

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 :

Title	DIRECTOR	Title	SECRETARY, DIRECTOR		
Name	VANLANGENDONCK, FRANCIS	Name	DIMARE, SHEILA		
Address	9180 NW 160TH AVENUE	Address	2205 NW 110TH AVENUE		
City-State-Zip:	MORRISTON FL 32668	City-State-Zip:	OCALA FL 34482		
Title	1VP, DIRECTOR	Title	TREASURER, DIRECTOR		
Name	FERNUNG, BRENT	Name	HEATH, III, BONNIE M		
Address	5571 NW 100TH STREET	Address	7145 NW 125TH STREET ROAD		
City-State-Zip:	OCALA FL 34482	City-State-Zip:	REDDICK FL 32686		
Title Name Address	PRESIDENT, DIRECTOR MATTHEWS, DVM, PHIL 9420 S MAGNOLIA AVE	Title Name Address	CEO POWELL, LONNY T 801 SW 60TH AVE		
City-State-Zip:	OCALA FL 34476	City-State-Zip:	OCALA FL 34474		
Title Name Address City-State-Zip:	2VP, DIRECTOR RUSSELL, SR., GEORGE L 2530 SW 36TH STREET	Title Name Address City-State-Zip:	DIRECTOR BARBAZON, JOE PLEASANT ACRES FARM 2153 SE HIGHWAY 41 MORRISTON FL 32668		

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: LONNY T. POWELL	CEO	04/22/2013

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	DIRECTOR	Title	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
Title	DIRECTOR	Title	DIRECTOR
Name	POTTER, LINDA A	Name	PARKS, DIANE
Address	BRIDLEWOOD FARM	Address	P O BOX 770038
City-State-Zip:	8318 NW 90TH TERRACE OCALA FL 34482	City-State-Zip:	OCALA FL 34482
Title		Title	DIRECTOR
Title		Name	WHEELER, GREG
Name	WEBER, CHARLOTTE C	Address	10137 NW 19TH PLACE
Address	LIVE OAK STUD 9275 SW 9TH STREET ROAD	City-State-Zip:	OCALA FL 34482
City-State-Zip:	OCALA FL 34481		
Title	DIRECTOR		

Name	O'FARRELL, III, JOSEPH M

- Address OCALA STUD FARMS P O BOX 818 City-State-Zip: OCALA FL 34478