2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004874

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:

801 SW 60TH AVENUE OCALA, FL 34474

FEI Number: 59-0944678 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

FILED Feb 08, 2019

Secretary of State

1113018097CC

Officer/Director Detail:

Title DIRECTOR Title CEO

 Name
 CAMPBELL, GILBERT
 Name
 POWELL, LONNY T

 Address
 4451 NE 180TH AVENUE
 Address
 801 SW 60TH AVE

 City-State-Zip:
 WILLISTON FL 32696
 City-State-Zip:
 OCALA FL 34474

Title VP, DIRECTOR Title DIRECTOR

Name WHEELER, GREG Name BERKELHAMMER, BARRY

Address 10137 NW 19TH PLACE Address ABRACADABRA FARM 510 SE HIGHWAY 484

City-State-Zip: OCALA FL 34482 City-State-Zip: OCALA FL 34480

Title SECRETARY, DIRECTOR Title DIRECTOR

Name ISAACS, GEORGE Name KOSANOVICH, MILAN Address BRIDLEWOOD FARM

BRIDLEWOOD FARM
8318 NW 90TH TERRACE

Address
BROKEN BACK FARM

901 SW 73RD ROAD
City-State-Zip: OCALA FL 34482

City-State-Zip: OCALA FL 34476

Title DIRECTOR Title DIRECTOR

Name KENT, RICHARD Name DAILEY, VALERIE

Address 1121 SE 12TH TERRACE Address 5780 SW 20TH STREET

City-State-Zip: OCALA FL 34471 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 PRESIDENT, DIRECTOR Title VP, DIRECTOR

Name FERNUNG, BRENT Name MATTHEWS, PHIL DVM

Address JOURNEYMAN STUD Address 9420 S MAGNOLIA AVENUE

5571 NW 100TH STREET

City-State-Zip: OCALA FL 34476

City-State-Zip: OCALA FL 34482

Title DIRECTOR

Name YUTANI, FRED MD

 Name
 JONES, BOBBY
 Address
 2801 SE 1ST AVE.

 Address
 City-State-Zip:
 OCALA FL 34471

City-State-Zip: REDDICK FL 32686

Title DIRECTOR

Title TREASURER, DIRECTOR Name BULMAHN, T. PAUL

Name RUSSELL, GEORGE Address GOLDMARK FARM,LLC

5290 NW 130TH AVE

City-State-Zip: REDDICK FL 32686 City-State-Zip: OCALA FL 34482

Title DIRECTOR Title DIRECTOR

Name DE MERIC, NICK Name FULLER-VARGAS, LAURINE

Address MANDUDEN FARMS/DE MERIC STABLES Address 14650 NW HWY 464B 4001 NW 130TH AVE City-State-Zip: MORRISTON FL 32668

4001 NW 1301H AVE City-State-Zip: MORRIST City-State-Zip: OCALA FL 34482