

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000079679

Entity Name: FLORIDA EQUINE PUBLICATIONS, INC.

Current Principal Place of Business:

801 SW 60TH AVE
OCALA, FL 34474-1827

Current Mailing Address:

801 SW 60TH AVE
OCALA, FL 34474-1827

FEI Number: 59-3406060

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWELL, LONNY T
801 SW 60TH AVE
OCALA, FL 34474-9516 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

Officer/Director Detail :

Title FIRST VICE CHAIRMAN, DIRECTOR
Name O'FARRELL, JOSEPH M III
Address 4400 SW 27TH AVENUE
City-State-Zip: Ocala FL 34471

Title SECOND VICE CHAIRMAN, DIRECTOR
Name CAMPBELL, GILBERT G
Address 4451 NE 180TH AVENUE
City-State-Zip: WILLISTON FL 32696

Title SECRETARY, DIRECTOR
Name DIMARE, SHEILA
Address 2205 NW 110TH AVENUE
City-State-Zip: Ocala FL 34482

Title CEO, PUBLISHER
Name POWELL, LONNY T
Address 801 SW 60TH AVENUE
City-State-Zip: Ocala FL 34474

Title CHAIRMAN, DIRECTOR
Name RUSSELL, SR., GEORGE L
Address 2530 SW 36TH STREET
City-State-Zip: FT LAUDERDALE FL 33312

Title TREASURER, DIRECTOR
Name BREI, FRED
Address JACKS OR BETTER FARM
 7600 NW 120TH STREET
City-State-Zip: Ocala FL 32686

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LONNY POWELL

CEO

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date