

FILE NOW: FILING FEE AFTER MAY 1, IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

96 MAY 1 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 674259 (7)

1. Corporation Name

FLORIDA THOROUGHbred ADVERTISING, INC.

T/A FTA Marketing + Consulting

Principal Place of Business

1010 EAST SILVER SPRINGS BLVD.
SUITE L
OCALA FL 34470

Mailing Address

1010 EAST SILVER SPRINGS BLVD.
SUITE L
OCALA FL 34470

3. Date Incorporated or Qualified
06/20/1980

3a. Date of Last Report
03/24/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-2004396

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOLDMAN, DAVID
1010 EAST SILVER SPRINGS BLVD.
SUITE L
OCALA FL 34470

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and term of appointment

(NOTE: Registered Agent's signature is required when not signing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME GARBER, MARTIN ☒ DELETE
STREET ADDRESS 1010 E. SILVER SPRINGS BLVD., SUITE L
CITY-ST-ZIP Ocala FL 34470

TITLE VPT
NAME GOLDMAN, DAVID ☐ DELETE
STREET ADDRESS 1010 E. SILVER SPRINGS BLVD., SUITE L
CITY-ST-ZIP Ocala FL 34470

TITLE
NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 NAME 1010 E. SILVER SPRINGS BLVD., SUITE L
12 NAME
13 STREET ADDRESS
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21 TITLE P/S
22 NAME Goldman, David ☒ Change ☐ Addition
23 STREET ADDRESS (same address)
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31 TITLE V/T
32 NAME Ponder, Sharron ☐ Change ☒ Addition
33 STREET ADDRESS 1010 E. Silver Springs Blvd, L
34 CITY-ST-ZIP Ocala, FL 34470 ☐ Change ☐ Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sharron D. Ponder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25 '96 (352)
840-0188
Date of Filing

CR2E034 (12/95)