2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 710986

Entity Name: FLORIDA STANDARDBRED BREEDERS & OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1800 SOUTHWEST THIRD STREET
POMPANO BEACH, FL 330693106

New Principal Place of Business:

Current Mailing Address:

1800 SOUTHWEST THIRD STREET
POMPANO BEACH, FL 330693106

New Mailing Address:

FEI Number: 59-6215848 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURRAY, E. JANE
7410 CORKWOOD CIR
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

RIPOLL, JAMES M ADMIN
1800 SW 3 STREET
POMPANO BEACH, FL 33069 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: JAMES M. RIPOLL 04/14/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DETERS, MICHAEL
Address: 4523 NW 50 STREET
City-St-Zip: COCONUT CREEK, FL 33073

Title: VD ( ) Delete
Name: AUDLEY, THOMAS
Address: 1869 SW 22 PLACE
City-St-Zip: BELL, FL 32619

Title: VD ( ) Delete
Name: GARRITY, CHRISTINE
Address: 10635 LA REINA ROAD
City-St-Zip: DELRAY BEACH, FL 33446

Title: SD ( ) Delete
Name: BIRKHOLD, GEORGE
Address: 512 N. ORANGE AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: T ( ) Delete
Name: BRYAR, JEAN
Address: 4107 CARRIAGE DRIVE
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MIKE DETERS DIR 04/14/2009
Electronic Signature of Signing Officer or Director Date