

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711620

FILED
Apr 29, 2008
Secretary of State

Entity Name: FLORIDA PALOMINO EXHIBITOR ASSOCIATION, INC.

Current Principal Place of Business:

10 N. ROSCOE BLVD.
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

10 N. ROSCOE BLVD.
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 59-2493654 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROTH, CYNTHIA
10 N. ROSCOE BLVD.
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROTH, CYNTHIA
Address: 10 N. ROSCOE BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP () Delete
Name: PLAYER, JEFF
Address: P.O. BOX 2051
City-St-Zip: NAPLES, FL 34106

Title: VP () Delete
Name: MANSER, DEBBIE
Address: 96840 BLACKLOCK ROAD
City-St-Zip: YULEE, FL 32097

Title: ST () Delete
Name: BRAGG, SUSAN
Address: 274 PALMETTO BLUFF
City-St-Zip: PALATKA, FL 32177

Title: BM () Delete
Name: SWEARINGEN, LAURA
Address: 439 WESLEY RD.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: BM () Delete
Name: MARLOW, VALERIE
Address: 2835 BAKER AVENUE
City-St-Zip: MARIANNA, FL 32446

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
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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: CYNTHIA ROTH

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date