FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

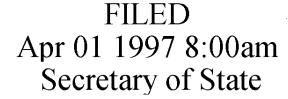
1997 713481 DOCUMENT #

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CENTRAL FLORIDA HUNTER AND JUMPER ASSOCIATION, I NC.

Principal Place of Business

Mailing Address





10901 JUNIPERUS PLACE TAMPA FL 33618		10901 JUNIPERUS PLACE TAMPA FL 33618-3817			
				3. Date Incorporated or Qualified 10/18/1967	3a. Date of Last Report 01/24/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 MON N	A CONNIE LREYER	26 SAT	nE	59-2889667	Not Applicable
Suite, Apt 1 22 /604	53 RD ST. E.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 PAIMETTO, FLORIDA 28				Trust Fund Contribution	Added to Fees
Zip Country Zip 24 34221 25 U.S. A. 29 3			Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
24 0 7 0 -	9. Name and Address of Current		<u> </u>	10. Name and Address of New Reg	
	J CROWDER JNIPERUS PL. FL 33618		81 Name 82 Street A 83 84 City 1	COUNIE DREY ER Address (P.O. Box Number is Not Acceptable) 14 53 RO STREET	(43)
I			B4 City	ALMETTO	FL 85 Zio Code /
11. Pursuant to office or reagent. Lar	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation.	and 617.1508, Florida Statutes Florida. Such change was aut ons of, Section 617.0503, Florid	the shove named	corporation submits this statement for the poration's board of directors. I hereby acception and the statement for the poration's board of directors.	urnose of changing its registered
SIGNATORE _	Signature, typed or printed name of registered again	and title if applicable. (NOTE: F	Registered Agent signature		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	VD	☐ DELETE	1.1 TITLE	\mathcal{D}	☐ Change ☒ Addition
NAME	POWERS, GEORGANN		1.2 NAME	DON STEWART AVE	
STREET ADDRESS	9595 66TH ST. N.		1.3 STREET ADDRESS	5531 5.W. 7TH AVE.	
CITY-ST-ZIP	PINELLAS PARK FL		1.4 CITY-ST-ZIP	OCALA, FL 34474	
TITLE	TD	☐ DELETE	2.1 TITLE	P	☐ Change ☑ Addition
NAME	CROWDER, SANDRA		2.2 NAME	KETH TOWELL	
STREET ADDRESS	10901 JUNIPERUS PL.		2.3 STREET ADDRESS	18415 CITATION ST.	
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP	LOTZ, FL. 33549	
	PD	☐ DELETE	3.1 TITLE		Change Addition
NAME	DOWING, PADDY		3.2 NAME	DOWNING PADDY 4623 PEARL AVE.	
STREET ADDRESS	3034 UNION ST		3.3 STREET ADDRESS	4623 PEARL AVE.	WEST
CITY-ST-ZIP	CLEARWATER FL		3.4. CITY-ST-ZIP	TAMPA, FL 33611	
TITLE	D	☐ DELETE	4.1 TITLE	~ / /	Change Addition
NAME	PADDY DOWNING		4. 2 NAME	DAMMAN PADDY	
STREET ADDRESS	3030A UNION ST		4.3 STREET ADDRESS	DOWNING PADDY 4623 PLARL AVE	WEST
CITY-S1-ZIP	CLEARWATER FL		4.4 CITY - ST - ZIP	TAMPA, FL 336/1	
TITLE	D	DELETE	C 4 747. F		Change Addition
NAME	HANSEN, BONNIE		5.2 NAME	DREWER TREAS	SURER
	10993 124TH AVENUE NO.		5.3 STREET ADDRESS	MAKE SAPIST F.	
STREET ADDRESS	LARGO FL		U.S STINCET ADDRESS	D CONNIE DREYER, TREA 1604 53RD ST. E. PAIME TTO, EL 34	12.2-1
CITY-SI-ZIP	LANGO FL	☐ DELETÉ	5.4 CITY - ST - ZIP	THIME 110, IL 34	Change Addition
TITLE		- DETELE	U.I IIILE		CT cuantia CT Manuali
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6.4 CiTY - ST - ZIP	totad in Castion 110 07/2Vi). Elocida Statutas	

Les mereby certify that the information supplied with this litting does not quality for the exemption stated in Section 119.07(3)(i). 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.