

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715114

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** PALM BEACH COUNTY HORSEMAN'S ASSOCIATION, INC.

**Current Principal Place of Business:**

410 NW 11TH AVENUE  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

**Current Mailing Address:**

410 NW 11TH AVENUE  
BOCA RATON, FL 33486 US

**New Mailing Address:**

**FEI Number:** 51-0188530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROOT, ANN  
410 NW 11TH AVENUE  
BOCA RATON, FL 33486 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  
**Name:** ROOT, ANN  
**Address:** 410 NW 11TH AVENUE  
**City-St-Zip:** BOCA RATON, FL 33486 US

**Title:** VP  
**Name:** THORNDYKE, PEGGY  
**Address:** 1294 N.W. 5TH ST.  
**City-St-Zip:** BOCA RATON, FL 33486 US

**Title:** T  
**Name:** TYSON, CATHY  
**Address:** 1030 CLYDESDALE DRIVE  
**City-St-Zip:** LOXAHATCHEE, FL 33470 US

**Title:** S  
**Name:** HUGINS, NANCY  
**Address:** 3105 D. SPANISH WELLS DR.  
**City-St-Zip:** DELRAY BEACH, FL 33445 US

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

**SIGNATURE:** ANN R. ROOT

P

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date