

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734752

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: SOUTHSIDE SADDLE CLUB, INC.

## Current Principal Place of Business:

2980 GREENBRIAR RD  
JACKSONVILLE, FL 32259 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 600889  
JACKSONVILLE, FL 322600889 US

## New Mailing Address:

FEI Number: 59-3162344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOVALL, DOUG  
10338 BELMONT STAKES CT  
JACKSONVILLE, FL 32257 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: CHAPPELL, KAREN  
Address: 6975 CR 16A  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: VP ( ) Delete  
Name: VIZCAINO, MIKE  
Address: 355 BAR B RANCH ROAD  
City-St-Zip: ST AUGUSTINE, FL 32092

Title: T ( ) Delete  
Name: STOVALL, DOUG  
Address: 10338 BELMONT STAKES CT  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Delete  
Name: FRERING, PATRICIA  
Address: 3300 PACETTI RD, LOT J  
City-St-Zip: ST. AUGUSTINE, FL 32092

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WILLIS, RODNEY  
Address: PO BOX 80  
City-St-Zip: HASTINGS, FL 32145 US

Title: VP (X) Change ( ) Addition  
Name: FRERING, ROBERT  
Address: 3300 PACETTI RD. LOT J  
City-St-Zip: ST AUGUSTINE, FL 32092

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: DOUGLAS M STOVALL

T

04/07/2009

Electronic Signature of Signing Officer or Director

Date