2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741469

FILED Mar 23, 2009 Secretary of State

Entity Name: SOUTHERN REGIONAL PASO FINO HORSE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

SE 150 ST. 3201 SW 34TH AVE. SUMMERFIELD, FL 34491 OCALA, FL 34474

Current Mailing Address: New Mailing Address:

SE 150 ST. PO BOX 771618 SUMMERFIELD, FL 34491 PO BOX 771618 OCALA, FL 34474

FEI Number: 59-3078883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FELL, BONITA L TREASUR

1719 SE 150 ST.

SUMMERFIELD

OCALA, FL 34491 US

OCASIO, JOHN TREASUR

12837 KEDLESTON CR.

FORT MYERS, FL 33912 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: JOHN OCASIO 03/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PRES () Delete
 Title:
 PRES (X) Change () Addition

 Name:
 FELL, CLAYTON PRES
 Name:
 BARQUET, JORGE PRES

 Address:
 1719 SE 150 ST.
 Address:
 3201 SW 34TH AVENUE

 City-St-Zip:
 SUMMERFIELD, FL 34491
 City-St-Zip:
 OCALA, FL 34474

Title: V PS () Delete Title: V PS (X) Change () Addition

Name: LIVINGSTON, STEPHAINE V.PRES Name: DAVILA, JOSE V.PRES

Address: 351 SE 90 ST. Address: PO BOX 770

City-St-Zip: OCALA, FL 34480 City-St-Zip: SUMMERFIELD, FL 34492

 Title:
 TRES
 () Delete
 Title:
 TRES
 (X) Change () Addition

 Name:
 FELL, BONITA L TRES
 Name:
 OCASIO, JOHN TRES

 Address:
 1719 SE 150 ST.
 Address:
 12837 KEDLESTON CIRCLE

City-St-Zip: SUMMERFIELD, FL 34491 City-St-Zip: FORT MYERS, FL 33912

Title: SEC () Delete Title: () Change () Addition Name: KENNEDY. DALE Name:

 Name:
 KENNEDY, DALE
 Name:

 Address:
 7992 NW. 14TH. ST.
 Address:

 City-St-Zip:
 OCALA, FL 34482
 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: JOHN OCASIO TRE 03/23/2009