

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 02, 2011
Secretary of State

DOCUMENT# 747795

Entity Name: TWIN RIVERS SADDLE CLUB, INC.**Current Principal Place of Business:**14100 SW CITRUS BLVD
INDIANTOWN, FL 34956 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 206
PALM CITY, FL 34991**New Mailing Address:****FEI Number:** 59-2578295**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FISH, STEPHANY
15711 91ST TERRACE NORTH
JUPITER, FL 33478 US**Name and Address of New Registered Agent:**FARLEY, NICHOLE
1055 SE PONDEROSA LANE
STUART, FL 34997 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: NICHOLE FARLEY

09/02/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FARLEY, NICHOLE
Address: 1055 SE PONDEROSA LANE
City-St-Zip: STUART, FL 34997

Title: VP
Name: SHARE, LINDA
Address: 400 SE ROGERS COURT
City-St-Zip: STUART, FL 34994

Title: S
Name: STEPHANOFF, KIM
Address: 3379 SW SUNSET TRACE CT
City-St-Zip: PALM CITY, FL 34990

Title: T
Name: RUSSELL, STUART R
Address: P.O. BOX 206
City-St-Zip: PALM CITY, FL 34991

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: NICHOLE FARLEY

P

09/02/2011

Electronic Signature of Signing Officer or Director

Date