

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 25 1996 8:00 am
Secretary of State

DOCUMENT # 757767 (9)

1. Corporation Name

SOUTH FLORIDA TROTTER CENTER, INC.

Principal Place of Business

**7563 STATE ROAD 7
LAKE WORTH FL 33467**

Mailing Address

**7563 STATE ROAD 7
LAKE WORTH FL 33467**

3. Date Incorporated or Qualified
04/28/1981

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2098051

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLANIGAN, JOHN F
625 NORTH FLAGLER DRIVE
9TH FLOOR
W PALM BEACH FL 33402**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

**D LOYENS, HARRY
R.R. #2 N/A
LONDON, ONTARIO CA**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**STD BURGESS, BLAIR
BOX 220
CAMPBELLVILLE, ONT., C**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**Sec BROWN, GLEN
BOX 1000 N/A
INGLEWOOD, ONTARIO CANADA**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**D SHOLTY, GEORGE
1515 REDD RD.
LEXINGTON KY**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

**Vice Pres WAPLES, RON
R. R. #1
ROCKWOOD, ONT. CAN.**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**Gene E Daisy
5505 Fairway Pk De #205
Beyrten Beach FL 33437**

☒ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

**Glen Brown
Box 1000 N/A
Inglewood, Ontario, Canada**

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

**Jim Bullock
P.O. Box 220 N/A
Campbellville, Ontario**

☒ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, on an attachment with an address.

SIGNATURE:

Gene E Daisy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-29-96

Date

Daytime Phone #

7/25/96

CR2E037 (12/95)