

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 764379

1. Entity Name

GOLD COAST ARABIAN HORSE CLUB, INC.

Principal Place of Business

601 CLEARY ROAD
WEST PALM BEACH FL

Mailing Address

601 CLEARY ROAD
WEST PALM BEACH FL

2. Principal Place of Business

3. Mailing Address

2800 SE Bridge Rd.

2800 SE Bridge Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hobe Sound FL

City & State

Hobe Sound FL

Zip

33455

Country

USA

Zip

33455

Country

USA

4. FEI Number

65-0764379

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHEEDY-KNISLEY, PAMELA A.
601 CLEARY RD.
W. PALM BEACH FL 33413

7. Name and Address of New Registered Agent

Name Dan Martinelli

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

2800 SE Bridge Rd.

City Hobe Sound

FL

Zip Code

33455

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

13 Feb 01

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MARTINELLI, DAN
STREET ADDRESS 2800 BRIDGE RD
CITY-ST-ZIP HOBE SOUND FL 33455

Delete

TITLE VD
NAME HENLEY, KELLIE
STREET ADDRESS 10333 RANDOLPH SIDING RD
CITY-ST-ZIP JUPITER FL 33478

Delete

TITLE SP
NAME RAZ, MICHELE
STREET ADDRESS 11173 164TH COURT
CITY-ST-ZIP JUPITER FL 33478

Delete

TITLE TD
NAME SHEEDY-KNISLEY, PAMELA
STREET ADDRESS 601 CLEARY ROAD
CITY-ST-ZIP WEST PALM BEACH FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE VD
NAME NORMA VANFOSSEN
STREET ADDRESS 17336 PRADO BLVD.
CITY-ST-ZIP LOXAHATCHEE, FL 33470

Change Addition

TITLE SD
NAME LIZ PEREZ-RIDDLE
STREET ADDRESS 15175-9310 LANE NORTH
CITY-ST-ZIP JUPITER, FL 33478

Change Addition

TITLE TD
NAME JEANNINE SMITH
STREET ADDRESS 13966-159th STREET NORTH
CITY-ST-ZIP JUPITER, FL 33478

Change Addition

TITLE D
NAME STEFANIE A. CHEATWOOD
STREET ADDRESS 2800 SE BRIDGE RD.
CITY-ST-ZIP HOBE SOUND, FL 33455

Change Addition

TITLE D
NAME DOROTHY DICK
STREET ADDRESS 4906 WIGGINS RD.
CITY-ST-ZIP LAKE WORTH, FL 33463

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/01

(561) 546 5555

Date

Daytime Phone #

CR2E037 (10/00)

0050574

FILED
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90004 043 ****61.25

920707



DO NOT WRITE IN THIS SPACE