2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2003
Secretary of State

DOCUMENT# F01000001609

Entity Name: GAINESWAY THOROUGHBREDS LTD. INC.

Current Principal Place of Business:

3750 PARIS PIKE
LEXINGTON, KY 405771690

New Principal Place of Business:

Current Mailing Address:

3750 PARIS PIKE
LEXINGTON, KY 405771690

New Mailing Address:

FEI Number: 61-1166182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BECK, GRAHAM
Address: 3750 PARIS PIKE
City-St-Zip: LEXINGTON, KY 405771690

Title: VD ( ) Delete
Name: BECK, ANTONY
Address: 3750 PARIS PIKE
City-St-Zip: LEXINGTON, KY 405771690

Title: S ( ) Delete
Name: VALENTINE, GINGER
Address: 3750 PARIS PIKE
City-St-Zip: LEXINGTON, KY 405771690

Title: TD ( ) Delete
Name: AKER, CHARLIE
Address: 3750 PARIS PIKE
City-St-Zip: LEXINGTON, KY 405771690

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V ( ) Change (X) Addition
Name: RENFROW, JAMES
Address: 2031 SW 20TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLIE AKER TD 07/30/2003

Electronic Signature of Signing Officer or Director — Date