## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000003481

Entity Name: GPRA THOROUGHBRED TRAINING CENTER, INC.

FILED Feb 03, 2012 Secretary of State

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

445 MAGNA DR

2ND FLOOR

455 MAGNA DR

2ND FLOOR

AURORA, ON L4G 7A9 CA AURORA, ON L4G 7A9 CA

Current Mailing Address: New Mailing Address:

445 MAGNA DRIVE, 2ND FLOOR AURORA, ON L4G 7A9 CA 455 MAGNA DRIVE, 2ND FLOOR AURORA, ON L4G 7A9 CA AURORA, ON L4G 7A9 CA

FEI Number: 98-0342326 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:

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

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: AVIOLI, GREG

Address: 455 MAGNA DRIVE, 2ND FLOOR City-St-Zip: AURORA,, ON L4G 7A9 CA

Title: EVP

Name: STRACHAN, LYLE

Address: 455 MAGNA DRIVE, 2ND FLOOR City-St-Zip: AURORA, ON L4G 7A9 CA

Title: VPRE

Name: ROGERS, MIKE

Address: 455 MAGNA DRIVE, 2ND FLOOR City-St-Zip: AURORA, ON L4G 7A9 CA

Title: CONT

Name: COLEMAN, ANGIE

Address: 455 MAGNA DRIVE, 2ND FLOOR City-St-Zip: AURORA, ON L4G 7A9 CA

Title: V/GM

Name: VANDENBROEK, GARY
Address: 455 MAGNA DRIVE, 2ND FLOOR
City-St-Zip: AURORA, ON L4G 7A9 CA

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGIE COLEMAN CONT 02/03/2012