FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M73920

(4)

HUBER HORSE FARMS SOUTH, INC.

FILED

May 06 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address					f gobiodol for fodda rante abite noon oddi deant begin begin begin begin delle deant abbit			
% JOHN L. SGI 2285 GÉNESEA VERO BEACH F	LN.	% JOHN L. SCANLON. J 2285 GENESEA LN. VERO BEACH FL 32963-1						
					3. Date Incorporated or Qualifie 03/28/1988	d 3a. Date 05/01/		oport
2. Principal P	lace of Business	2a. Mailing Address		***************************************	4. FEI Number			plied For
21		26			06-1235238 Not Applicable			
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
Zip Country			Count		Trust Fund Contribution			
	├ ¬	·····1	30	у	This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	25 9. Name and Address of Curre	29 nt Registered Agent	[30]		10. Name and Address of New Registered Agent			
SCAL	NLON, JOHN L., JR.		8	Name	700 110000 2010 11000			
	GENESEA LN.		82 Street Ad		dress (P.O. Box Number is Not Accep	table)		
VER	D BEACH FL 32983		8:					
			<u></u>				T	
			8-	4 City		FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.								
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature received when reinstating) DATE								
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND D	RECTOF	RS IN 12
TITLE	D	DELETE	1.1 TITLE				Change	Addition
NAME	SCANLON, JOHN L., JR.		1.2 NAME					13
STREET ADDRESS	2285 GENESEA LN.		1.3 STRE	T ADDRESS				ļį.
CITY-ST-ZIP	VERO BEACH FL		1.4 CHY	ST- 7IP				
TITLE	D	DEFELE 511		}		L	Change	L Addition
NAME	HUBER, EDWARD J.		22 NAME		· · · · · · · · · · · · · · · · · · ·			
STREET ADDRESS	BINGLEY RD.		23 STRE	ET ADDRESS				
CITY-ST-ZIP	CAZENOVIA NY	D of least	2 4 CITY				1 6.	<u> </u>
TITLE		☐ DELFTE	31 TITLE	ì		L	J Change	L_ Addition
NAME OTREST ADDRESS			32 NAM					
STREET ADDRESS				EL ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE	···		·	Change	Addition
NAME		En pecció	4. C III C			L	vinungo	2_1 1.00men
STREET ADDRESS				LI ADDRESS				
CITY-ST-ZIP			4.4 CITY					
TITLE		DELFIE	5.1 TOLE				Change	Addition
NAME			5.2 NAMI				•	
STREET ADDRESS				EL ADDRESS				-
CITY-ST-ZIP			5.4 GITY	- (
TITLE		DELETE	61 HILE	**			Change	Addition
NAME			6.2 NAMI					
STREET ADDRESS		,	6.3 STRE	ET ADDRESS				
CITY-ST-ZIP			6.4 CHY	· \$1 · 7/P				

14. I do 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 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 fusite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Blog 13 if changed, or on an all Ohn L. Scanlon