

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000004966

1. Entity Name

HORSE FEVER, INC.

Principal Place of Business

Mailing Address

4727 NW 60 AVE 801 SW 60th Ave
OCALA FL 34482-2098 Ocala, FL 34474

2. Principal Place of Business

801 SW 60th Avenue

3. Mailing Address

801 SW 60th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Ocala FL

City & State
Ocala FL

Zip
34474

Country
USA

Zip
34474

Country
USA

4. FEI Number
65-1086441

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HANCOCK, RICHARD E
4727 NW 60 AVE - 801 SW 60th Avenue
OCALA FL 34482-2098 Ocala FL 34474

Name

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

City

FL

Zip Code

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 date if applicable

(NOTE: Registered Agent signature required when selecting)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D	President	☐ Delete
NAME	Richard E Hancock	
STREET ADDRESS	801 SW 60th Avenue	
CITY-STATE-ZIP	Ocala FL 34474	
TITLE	Vice President	☒ Delete
NAME	Thomas A Chiota	
STREET ADDRESS	1701 SW 60th Avenue	
CITY-STATE-ZIP	Ocala FL 34474	
TITLE	Director	☒ Delete
NAME	Donald R Disney	
STREET ADDRESS	899 SW 85th Ave	
CITY-STATE-ZIP	Ocala FL	
TITLE	Director	☒ Delete
NAME	George M Steubrenner III	
STREET ADDRESS	3727 SW 95th Ave Rd	
CITY-STATE-ZIP	Ocala FL 34482	
TITLE	Director	☒ Delete
NAME	Harry T Mangurian Jr	
STREET ADDRESS	5850 SW State Rd 200	
CITY-STATE-ZIP	Ocala FL 34474	
TITLE D	Director	☐ Delete
NAME	Harold J Plumley	
STREET ADDRESS	9453 NW Hwy 27	
CITY-STATE-ZIP	Ocala FL 34482	

TITLE D	Director	☐ Change ☒ Addition
NAME	Robert A Cromartie	
STREET ADDRESS	801 SW 60th Avenue	
CITY-STATE-ZIP	Ocala FL 34474	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 189.07(3)(b), 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 or powered.

SIGNATURE:

SIGNATURE REQUIRED

3/2/01

352-629-2160

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Business Phone #

01 MAY 25 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

03-07-01 90162 001

183.75

CR2037 (1000)