

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005869

FILED
Apr 14, 2010
Secretary of State

Entity Name: ST. JOHNS COUNTY HORSE COUNCIL, INC.

Current Principal Place of Business:

8200 SMITH RD
HASTINGS, FL 32145

New Principal Place of Business:

Current Mailing Address:

PO BOX 538
HASTINGS, FL 32145

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, BEVERLY A
4300 COUNTY ROAD 208
ST. AUGUSTINE, FL 32092 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

OFFICERS AND DIRECTORS:

Title: T
Name: MARGIE, O'LOUGHLIN
Address: 1925 SR 207
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: S
Name: BURTON, CINDI
Address: 9155 BARREL FACTORY ROAD
City-St-Zip: HASTINGS, FL 32145-542

Title: PP
Name: BRANDVOLD, STEVE
Address: 8233 CR 208
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: P
Name: PERREAULT, TERRI
Address: 4225 JEFFERSON AVE SO
City-St-Zip: HASTINGS, FL 32145

Title: PR
Name: FOURNIER, SHELLY
Address: 4300 COUNTY ROAD 208
City-St-Zip: ST AUGUSTINE, FL 32092

Title: VP
Name: FOSTER, BEVERLY
Address: CR 208
City-St-Zip: ST AUGUSTINE, FL 32092

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

SIGNATURE: BEVERLY A FOSTER

VP

04/14/2010

Electronic Signature of Signing Officer or Director

Date