

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006604

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** FLORIDA ROCKY MOUNTAIN HORSE ASSOCIATION, INC.

**Current Principal Place of Business:**

13301 MOUNTAIN VIEW  
CLERMONT, FL 34715

**New Principal Place of Business:**

4554 WINDMILL DRIVE  
INVERNESS, FL 34453

**Current Mailing Address:**

13141 MOONFLOWER CT.  
CLERMONT, FL 34711

**New Mailing Address:**

4554 WINDMILL DRIVE  
INVERNESS, FL 34453

**FEI Number:** 59-3737062

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DYKHOUSE, KORRIN L  
13141 MOONFLOWER CT.  
CLERMONT, FL 34711 US

**Name and Address of New Registered Agent:**

WILLIAMS, GREGORY L  
4554 WINDMILL DR.  
INVERNESS, FL 34453 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: GREGORY L. WILLIAMS

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WILLIAMS, GREGORY L  
Address: 4554 WINDMILL DRIVE  
City-St-Zip: INVERNESS, FL 34453

Title: D  
Name: CARTER, MAYE F  
Address: 13301 MOUNTAIN VIEW  
City-St-Zip: CLERMONT, FL 34715

Title: D  
Name: DYKHOUSE, KORRIN  
Address: 13141 MOONFLOWER CT  
City-St-Zip: CLERMONT, FL 34711

Title: D  
Name: ELDER, JOANIE  
Address: 4084 FAIRHILL WAY  
City-St-Zip: TALLAHASSEE, FL 32308

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: GREGORY L. WILLIAMS

D

04/27/2012

Electronic Signature of Signing Officer or Director

Date