

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006991

FILED
Apr 24, 2011
Secretary of State

Entity Name: HORSESISTERS & ASSOCIATES, INCORPORATED

Current Principal Place of Business:

124 S. PARK AVENUE
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

124 S. PARK AVENUE
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 59-3670805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUSTIN, CLAIRESE M
124 S. PARK AVENUE
TITUSVILLE, FL 32796 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: D
Name: AUSTIN, CLAIRESE M
Address: 124 S. PARK AVENUE
City-St-Zip: TITUSVILLE, FL 32796

Title: D
Name: AUSTIN, RONALD A
Address: 124 SOUTH PARK AVE
City-St-Zip: TITUSVILLE, FL 32796

Title: D
Name: HARVEY, KELLY
Address: 2910 AVON LANE
City-St-Zip: TITUSVILLE, FL 32796

Title: D
Name: SLATER, JOYCE R
Address: 6932 COLUMBINE DRIVE
City-St-Zip: COCOA, FL 32927

Title: D
Name: REINHOLD, DIANE
Address: 2625 SLASH PINE CT
City-St-Zip: TITUSVILLE, FL 32780

Title: D
Name: HEATHER, STRICKLAND
Address: 3890 VALLEY LANE
City-St-Zip: TITUSVILLE, FL 32780

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: JOYCE SLATER

D

04/24/2011

Electronic Signature of Signing Officer or Director

Date