2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N00000007174

Entity Name: AREA III SHETLAND MINIATURE HORSE CLUB, INC.

Current Principal Place of Business:

10780 N.E. 47TH AVE.
ANTHONY, FL 32617

New Principal Place of Business:

Current Mailing Address:

10780 N.E. 47TH AVE.
ANTHONY, FL 32617

New Mailing Address:

FEI Number: 59-3695829 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MORRIS, HOWARD
10780 NE 47TH AVE
ANTHONY, FL 32617 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:	TBOD	( ) Delete
Name:	MORRIS, HOWARD	
Address:	10780 NE 47TH AVENUE	
City-St-Zip:	ANTHONY, FL 32617	
Title:	VPD	( ) Delete
Name:	SNOW, MARK A	
Address:	2774 SE 172ND STREET	
City-St-Zip:	SUMMERFIELD, FL 33491	
Title:	BOD	( ) Delete
Name:	CIMIOTTA, RUTHANNE	
Address:	4251 S.E. 150TH ST	
City-St-Zip:	SUMMERFIELD, FL 34491	
Title:	ABOD	( ) Delete
Name:	CAUDILL, CHARLES	
Address:	7150 N.E. 138TH LN	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	SBOD	( ) Delete
Name:	BUONO, PATRICIA	
Address:	9601 137 N.W. AVE	
City-St-Zip:	MORRISTON, FL 32668	
Title:	TBOD	( ) Delete
Name:	MORRIS, GERALDINE	
Address:	10780 NE 47TH AVE.,	
City-St-Zip:	ANTHONY, FL 32617	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA BUOUNO MS 04/30/2009

Electronic Signature of Signing Officer or Director — Date