## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 24, 2006 8:00 am Secretary of State

DOCUMENT # N0100001853  1. Entity Name LEVY COUNTY HORSE CLUB, INC.						ary or S		
Principal Place of Business Mailing Address 6291 NW CR 336 P.O. BOX 2631 CHIEFLAND, FL 32626 US CHIEFLAND, FL 32644		US.	-	1071(00) ER 011(1	TURK BRIT OFFIL OFFIL	1844 <b>46</b> 401 1846 1884 8840 1	11	
2. Principal Place of Business		3. Mailing Address						
6891 NW 88 L Suite, Apt. #, etc.		Suite. Apt. #, etc.						
05/10, 7 (5/1	., 010.	Sale, ript. ii, e.e.			04212006 C	hg-NP	CR2E037 (11/05)	
Chie Fland, H.		City & State		4. FEI Number         Applied For           59-3716808         Not Applicable				
3262	26 LEVU	Zìp	Cou	ntry	5. Certificate of S	tatus Desired	S8.75 Add	
3000	6. Name and Address of Current	Registered Agent			7. Name and Add	iress of New Req	<u>`</u>	
SHARKEY, ANN E 6291 NW CR 336 CHIEFLAND, FL 32626				Name LEONORA L. HAIE Street Address (P.O. Box Number is Not Acceptable)				
				6891 NW88 Ln.				le,
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. I am familiar with, and accept								and accept
the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registrored agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
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	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Carr Trust Fund C	paign Fi		\$5.00 May Be Added to Fees		ke check payable t la Department of S	
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DII	9. Election Cam Trust Fund C RECTORS	paign Fi ontribution	on. 🗆	\$5.00 May Be Added to Fees	Florid	S AND DIRECTORS IN	tate
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowered.

SIGNATURE: Date Typed or Prented Name of Signature and Typed or Prented Name of Signature and Typed or Prented Name of Signature and Typed or Prented Name of Signature or Director