

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90041 026 ****70.00

DOCUMENT # N02000002981 1. Entity Name THE STANDARD BREED PLEASURE HORSE ORGANIZATION OF FLORIDA, INC.					
Principal Place of Business 3179 THOROUGHbred DR BROOKSVILLE, FL 34602			Mailing Address 3179 THOROUGHbred DR BROOKSVILLE, FL 34602		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent SWEGER, ROBERT 3179 THOROUGHbred DR BROOKSVILLE, FL 34602				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
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 the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEGER, ROBERT <input type="checkbox"/> Delete 3179 THOROUGHbred DR BROOKSVILLE, FL 34602		TITLE NAME STREET ADDRESS CITY-ST-ZIP	5 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWEGER, DEBRA <input type="checkbox"/> Delete 3179 THOROUGHbred DR BROOKSVILLE, FL 34602		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLIAMS, KIM <input type="checkbox"/> Delete 24910 WALKABOUT RANCH RD SORRENTO, FL 32776		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Delete ST. PETER, LEANE 5215 N. APOPKA VINELAND RD ORLANDO, FL 32818		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JUDITH CLARK 219 AMELO AVE ELLEUDON, FL. 34222	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input type="checkbox"/> Delete BOMBARDO, TINA 1508 LAKE ELLA RD FRUITLAND PARK, FL 34731		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BOMBARDO, PAT 1508 LAKE ELLA RD FRUITLAND PARK, FL 34731		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Tina Bombardo Tina Bombardo TD 2-9-04 (352) 728-3256 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

94014340



02022004 Chg-NP CR2E037 (10/03)

4. FEI Number
42-1535138

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

Attachment

~~#~~ NO 2000002981

**THE
STANDBRED PLEASURE HORSE ORGANIZATION
OF FLORIDA, INC.**

3179 THOROUGHBRED DRIVE
BROOKSVILLE, FLORIDA 34602

WWW.SPHOFL.COM

(352) 796-4842

Addition to #11

D
Ellen Wolf
5015 Bridgeway Lane
Lutz, Fl. 33558