

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90387 034 ****61.25

DOCUMENT # N02000002981

1. Entity Name

THE STANDARD BRED PLEASURE HORSE ORGANIZATION OF
FLORIDA, INC.



Principal Place of Business

14078 TROUVILLE DRIVE
TAMPA FL 33624

Mailing Address

14078 TROUVILLE DRIVE
TAMPA FL 33624

22000011

2. Principal Place of Business

3179 Thoroughbred Dr.

Suite, Apt. #, etc.

3. Mailing Address

3179 Thoroughbred Dr.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Brooksville FL

City & State

Brooksville FL

4. FEI Number

42-15 35138

☒ Applied For

☐ Not Applicable

Zip

34602

Country

USA

Zip

34602

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

SWEGER, ROBERT
14078 TROUVILLE DRIVE
TAMPA FL 33624

7. Name and Address of New Registered Agent

Name Robert L. Sweger
Street Address (P.O. Box Number is Not Acceptable)
3179 Thoroughbred Dr.
City Brooksville FL Zip Code 34602

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	SWEGER, ROBERT	
STREET ADDRESS	14078 TROUVILLE DRIVE	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWEGER, DEBRA	
STREET ADDRESS	14078 TROUVILLE DRIVE	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, KIM	
STREET ADDRESS	24910 WALKABOUT RANCH ROAD	
CITY-ST-ZIP	SORRENTO FL 32776	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	OHLRICH, LAURA	
STREET ADDRESS	21734 ROLLINGWOOD TRAIL	
CITY-ST-ZIP	EUSTIS FL 32736	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT SWEGER	
STREET ADDRESS	3179 THOROUGH BRED DR.	
CITY-ST-ZIP	BROOKSVILLE, FL 34602	
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEBRA SWEGER	
STREET ADDRESS	3179 THOROUGH BRED DR.	
CITY-ST-ZIP	BROOKSVILLE, FL 34602	
TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIM WILLIAMS	
STREET ADDRESS	24910 WALKABOUT RANCH RD.	
CITY-ST-ZIP	SORRENTO, FL 32776	
TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ST. PETER, LEANE	
STREET ADDRESS	5215 N. APOKA VINELAND RD.	
CITY-ST-ZIP	ORLANDO, FL 32818	
TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BOMBARDO, TINA	
STREET ADDRESS	1508 LAKE ELLA RD.	
CITY-ST-ZIP	FRUITLAND PARK, FL. 34731	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BOMBARDO, PAT	
STREET ADDRESS	1508 LAKE ELLA RD.	
CITY-ST-ZIP	FRUITLAND PARK, FL. 34731	

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

SIGNATURE REQUIRED

Debra Sweger P/D

1-19-03 813-220-2181

CR2E037 (10/02)

~~Attachment #~~ 20200002981

The Standardbred Pleasure Horse Organization
of Florida, INC.

#11. continued

Attachment

22000017

ADDITION

Title: D

Name: Hudak, Ellen

Address: 5015 BRIDGEWAY Lane

City State Zip: Lutz, Florida 33558