

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 19, 2011
Secretary of State

DOCUMENT# N02000006241

Entity Name: MINIATURE HORSE CLUB OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**2044 SW 19TH LANE
OKEECHOBEE, FL 34974**New Principal Place of Business:****Current Mailing Address:**2044 SW 19TH LANE
OKEECHOBEE, FL 34974**New Mailing Address:****FEI Number:** 16-1622927**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JOLICOUR, NANCY
2044 SW 19TH LANE
OKEECHOBEE, FL 34974 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: COFFEY, JOHN
Address: 16320 NW 32ND AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

Title: P
Name: JOLICOEUR, NANCY
Address: 2044 S.W. 19TH LANE
City-St-Zip: OKEECHOBEE, FL 34974

Title: D
Name: COFFEY, PATRICIA
Address: 16320 NW 32ND AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

Title: VP
Name: MIDDLETON, JUDY
Address: 16626 WINBURN DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: JOLICOEUR, JERRY
Address: 2044 S.W. 19TH LANE
City-St-Zip: OKEECHOBEE, FL 34974

Title: T
Name: SHAFFER, SHELLEY
Address: 6934 RIVERSIDE ST CIRCLE
City-St-Zip: BRADENTON, FL 34202

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: NANCY JOLICOEUR

P

01/19/2011

Electronic Signature of Signing Officer or Director

Date