

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02551

FILED
Apr 12, 2011
Secretary of State

Entity Name: NORTH FLORIDA ARABIAN HORSE CLUB, INC.

Current Principal Place of Business:

2451 QUARTER HORSE TRAIL
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

2506 QUARTER HORSE TRAIL
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: 59-2519397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILL, CHRISTINE A
2506 QUARTER HORSE TRAIL
MIDDLEBURG, FL 32068 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: VP
Name: DUNCAN, DEBBIE
Address: 108 TILLETS LANE
City-St-Zip: PALATKA, FL 32177 US

Title: S
Name: WELLS, CAROL
Address: 2439 QUARTER HORSE TRAIL
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: T
Name: WILL, CHRISTINE
Address: 2506 QUARTER HORSE TRAIL
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: P
Name: POOLEY, NANCY
Address: 2451 QUARTER HORSE TRAIL
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: D
Name: JOHNSON, LINDA
Address: 8422 HERLONG ROAD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D
Name: POOLEY, JOSEPH
Address: 2451 QUARTER HORSE TRAIL
City-St-Zip: MIDDLEBURG, FL 32068 US

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: CHRISTINE A. WILL

T

04/12/2011

Electronic Signature of Signing Officer or Director

Date