

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006817

FILED
Apr 14, 2009
Secretary of State

Entity Name: THE BAY COUNTY HORSEMAN'S ASSOCIATION, INC.

Current Principal Place of Business:

28 WOODLAND ROAD E.
PANAMA CITY, FL 32409

New Principal Place of Business:

16622 SINGER RD.
YOUNGSTOWN, FL 32466

Current Mailing Address:

POST OFFICE BOX 1422
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 04-3638260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMB, MARGARET
28 WOODLAND ROAD E.
PANAMA CITY, FL 32409 US

Name and Address of New Registered Agent:

VISCO, DONNA M
16622 SINGER RD.
YOUNGSTOWN, FL 32466 US

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: DONNA M. VISCO

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHAREWBERGER, MARY
Address: 3929 HWY 389
City-St-Zip: PANAMA CITY, FL 32405

Title: VPT () Delete
Name: LAMB, MARGARET
Address: 28 WOODLAND ROAD E.
City-St-Zip: PANAMA CITY, FL 32409

Title: S () Delete
Name: PIZZA, CAROL
Address: 7936 S.MCCANN ROAD
City-St-Zip: PANAMA CITY, FL 32409

Title: A (X) Delete
Name: DUNNE, BARRY
Address: 21309 CARIBBEAN LANE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: PR (X) Delete
Name: HAUSER, CHEYENNE
Address: 3405 JASMINE TRACE LANE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PACHUCKI, AMY
Address: 3842 JENKINS RD
City-St-Zip: YOUNGSTOWN, FL 32466

Title: VPT (X) Change () Addition
Name: HAUSER, CHEYENNE
Address: 1418 DUNNETT RD.
City-St-Zip: LYNN HAVEN, FL 32444

Title: T (X) Change () Addition
Name: VISCO, DONNA M
Address: 16622 SINGER RD.
City-St-Zip: YOUNGSTOWN, FL 32466

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DONNA M. VISCO

TREA

04/14/2009

Electronic Signature of Signing Officer or Director

Date