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NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 15, 1996 08:00 AM
Secretary of State

DOCUMENT # N03440 (7)

1. Corporation Name
PARKLAND HORSEMAN'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9430 TANGERINE PLACE APT. 105 FT. LAUDERDALE FL 33324-4426	9430 TANGERINE PLACE APT. 105 FT. LAUDERDALE FL 33324-4426

3. Date Incorporated or Qualified: 06/04/1984
3a. Date of Last Report: 07/03/1995
4. FEI Number: 65-0021014 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

ROGERS, SHANNON
9430 TANGERINE PLACE
#105
FT. LAUDERDALE FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE Shannon Rogers Shannon Rogers 2/29/96
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when qualifying) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TRUEBENBACH, KRISTY 2200 NE 49 STREET LIGHTHOUSE POINT FL 33064	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GIAFAGLIONE, LAURI 5735 NW 77 TERRACE PARKLAND FL 33067	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition SD & Mo HEATH, GRETCHEN 7373 NW 82ND TERR. PARKLAND, FL 33067
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WATT, LORI 4231 NW 71 STREET POMPANO FL 33073	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition VD FRANKLE, DIANE 632 MAYPOP CT. BOCA RATON FL 33486
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BACON, PATTI 5943 NW 66 WAY PARKLAND FL 33067	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ROGERS, SHANNON M 9430 TANGERINE PLACE FT LAUDERDALE FL 33324	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Shannon Rogers Shannon Rogers 2/29/96 954 473 2541
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0046381