2001 UNIFORM BUSINESS REPORT (UBR)

0006

DOCUMENT # N03440

1. Entity Name

PARKLAND HORSEMAN'S ASSOCIATION, INC.

FILED

01 SEP 28 AM 10:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
PARKLAND CITY HALL PARKLAND FL 33067	C/O ANDREWS 9836 W. SAMPLE RD. CORAL SPRINGS FL 33065

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0021014 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ANDREWS, LEWIS 9836 W SAMPLE RD CORAL SPRINGS FL 33065	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

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
After September 12, 2001, min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HORN, JENNIFER 5943 NW 66 WAY PARKLAND FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition PD Rick Bright 5943 NW 66 WAY Parkland, FL 33067
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HORN, DAWN 5943 NW 66 WAY PARKLAND FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 100004641991--6 -10/18/01--01057--020 ****236.25 ****236.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BALON, PATTI 5943 NW 66 WAY PARKLAND FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ANDREWS, LEWIS 6086 SW 74 TERR PARKLAND FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition TD Roxanne Cinelli 2700 Forest Hill Blvd. #101 Coral Spring, FL 33065
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ROGERS, SHANNON M 9430 TANGERINE PLACE FT LAUDERDALE FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (5/01)

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 9/20/01 954-815-5782.
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON SIGNING (ATTACH OR DIRECTOR)