2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N05000000548

Entity Name: DIXIE REINED COW HORSE ASSOCIATION, INC.

Current Principal Place of Business:

12992 CR755
WEBSTER, FL 33597 US

New Principal Place of Business:

Current Mailing Address:

12992 CR755
WEBSTER, FL 33597 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUTTER, DAVID S
12992 CR755
WEBSTER, FL 33597 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: PRES ( ) Delete
Name: BARRETT, TIM
Address: 3351 NE 127TH COURT
City-St-Zip: WILLISTON, FL 32696 US

Title: V-P (X) Delete
Name: BEOTE, JOHN
Address: 3901 SNELL ROAD
City-St-Zip: BARTOW, FL 33830 US

Title: SECY (X) Delete
Name: BOWEN, LISA
Address: 3268 RAMBLER AVENUE
City-St-Zip: ST. CLOUD, FL 34772 US

Title: TREA ( ) Delete
Name: RUTTER, DAVID
Address: 12992 CR 755
City-St-Zip: WEBSTER, FL 33597 US

Title: D (X) Delete
Name: KELSALL, BRAD
Address: P. O. BOX 667
City-St-Zip: FAIRFIELD, FL 32634 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DAVID RUTTER TRES 04/30/2009
Electronic Signature of Signing Officer or Director — Date