

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001125

FILED
Mar 19, 2009
Secretary of State

Entity Name: FLORIDA QUARTER HORSE RACING ASSOCIATION, INC.

Current Principal Place of Business:

1311 WINTER GARDEN-VINELAND RD
WINTER GARDEN, FL 34787

New Principal Place of Business:

9085 MAGNOLIA HILL DR.
TALLAHASSEE, FL 32309

Current Mailing Address:

1311 WINTER GARDEN-VINELAND RD
WINTER GARDEN, FL 34787

New Mailing Address:

9085 MAGNOLIA HILL DR.
TALLAHASSEE, FL 32309

FEI Number: 43-2098089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBB, PAMELA M ESQ
1311 WINTER GARDEN-VINELAND RD
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

FISCH, WILLIAM H CPA
6753 THOMASVILLE RD,
108
TALLAHASSEE, FL 32312 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: WILLIAM H. FISCH

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISCH, STEVE DVM
Address: 9085 MAGNOLIA HILL DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: TSD () Delete
Name: RICHARDS, GLEN
Address: 6869 US HIGHWAY 129 SOUTH
City-St-Zip: JASPER, FL 32052

Title: VD () Delete
Name: ROBB, PAMELA M ESQ
Address: 1311 WINTER GARDEN-VINELAND RD
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD () Delete
Name: BENTLEY, ROBERT G
Address: 271 CR 200
City-St-Zip: BUNNELL, FL 32110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TR/D (X) Change () Addition
Name: FISCH, WILLIAM H CPA
Address: 6753 THOMASVILLE RD,
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: SD (X) Change () Addition
Name: FRERING, PATRICIA
Address: 5280 TRUMAN PACETTI RD.
City-St-Zip: ST. AUGUSTINE, FL 32092

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: WILLIAM H. FISCH

TR/D

03/19/2009

Electronic Signature of Signing Officer or Director

Date