

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005304

FILED
Jan 19, 2007
Secretary of State

Entity Name: FLORIDA PANHANDLE SADDLE CLUB, INC.

Current Principal Place of Business:

20998 N.E. LEE FARM ROAD
BLOUNTSTOWN, FL 32424

New Principal Place of Business:

Current Mailing Address:

20998 N.E. LEE FARM ROAD
BLOUNTSTOWN, FL 32424

New Mailing Address:

FEI Number: 59-2950079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMONS, ROBIN D
20998 N.E. LEE FARM ROAD
BLOUNTSTOWN, FL 32424 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: P () Delete
Name: BARBEE, LARRY
Address: 14455 SR 71 NORTH
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VP () Delete
Name: WHITFIELD, VICKY
Address: 25291 NE CHARLES PIPPIN ROAD
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D () Delete
Name: CLEMONS, ROBIN D
Address: 20998 N.E. LEE FARM ROAD
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D () Delete
Name: YON, KEITH
Address: P.O. BOX 294
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D () Delete
Name: DAVIS, CATHY
Address: 16840
City-St-Zip: ALTHA, FL 32421

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 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: LARRY BARBEE

P

01/19/2007

Electronic Signature of Signing Officer or Director

Date