

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010953

FILED
May 01, 2007
Secretary of State

Entity Name: TREASURE COAST RIDING CLUB, INC.

Current Principal Place of Business:

6155 SW LEIGHTON FARMS ROAD
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

PO BOX 971
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 01-0807185 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GARNER, JAMIE A
3174 SW SUNSET TRACE CR
PALM CITY, FL 34990 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: GARNER, JAMIE A
Address: 3174 SW SUNSET TRACE CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: VP () Delete
Name: MCPHERSON, DANA
Address: 167 SOUTH SEWALLS POINT ROAD
City-St-Zip: STUART, FL 33496

Title: T () Delete
Name: WEIR, JANICE
Address: 2197 SHIPPING ROAD
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: S (X) Delete
Name: VERICELLA, ERICA
Address: 506 E. WEATHERBY RD.
City-St-Zip: FT. PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: FLUERY, LEE
Address: 681 SW COLLEGE PARK RD
City-St-Zip: PORT ST. LUCIE, FL 34953

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: JAMIE GARNER

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date