2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N08000007977

Entity Name: MINIATURE DONKEY ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

C/O DEBORAH JARMON
8424 E HAINES CT
FLORAL CITY, FL 34436

New Principal Place of Business:

Current Mailing Address:

C/O DEBORAH JARMON
8424 E HAINES CT
FLORAL CITY, FL 34436

New Mailing Address:

FEI Number: 36-4639950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JARMON, DEBORAH
8424 E HAINES CT
FLORAL CITY, FL 34436 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: DUNN, SALLY
Address: 15641 COUNTY ROAD 675
City-St-Zip: PARRISH, FL 34219

Title: VP ( ) Delete
Name: GREENFIELD, DAN
Address: 12879 SE 50TH ST
City-St-Zip: WEBSTER, FL 33597

Title: S ( ) Delete
Name: HARMON, DEBORAH
Address: 8424 E HAINES CT
City-St-Zip: FLORAL CITY, FL 34436

Title: T ( ) Delete
Name: MCCONNELL, MARGO
Address: 9152 KENTON ROAD
City-St-Zip: WESLEY CHAPEL, FL 33545

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: JARMON, DEBORAH
Address: 8424 E HAINES CT
City-St-Zip: FLORAL CITY, FL 34436

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: DEBORAH K. JARMON S 01/12/2009

Electronic Signature of Signing Officer or Director — Date