

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 11, 2011**  
**Secretary of State**

DOCUMENT# N08000008771

**Entity Name:** SOUTH FLORIDA HORSE SHOW ASSOCIATION, INC.**Current Principal Place of Business:**7900 SW 40TH STREET  
TROPICAL PARK  
MIAMI, FL 33170**New Principal Place of Business:****Current Mailing Address:**PO BOX 901913  
HOMESTEAD, FL 33090**New Mailing Address:****FEI Number:** 94-3462224**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MARLEY, FRANK E III  
3450 LAKESIDE DRIVE  
SUITE 110  
MIRAMAR, FL 33027 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  
**Name:** FRIES, DONNA  
**Address:** 6601 SW 62 CT  
**City-St-Zip:** MIAMI, FL 33143**Title:** CS  
**Name:** ZELMAN, LUCY  
**Address:** 11440 SW 102 CT  
**City-St-Zip:** MIAMI, FL 33176**Title:** S  
**Name:** VINA, MARILYN  
**Address:** 8777 SW 76 ST  
**City-St-Zip:** MIAMI, FL 33173**Title:** TREA  
**Name:** GONZALEZ, STACY  
**Address:** 23631 SW 142 AVE  
**City-St-Zip:** HOMESTEAD, FL 33032

I hereby 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 all other like empowered.

SIGNATURE: DONNA FRIES

PRES

09/11/2011

Electronic Signature of Signing Officer or Director

Date