

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001452

FILED  
Apr 22, 2011  
Secretary of State

**Entity Name:** THE ARCADIA ALL FLORIDA SADDLE CLUB, INC.

**Current Principal Place of Business:**

1299 SE HARGRAVE ST  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1821  
ARCADIA, FL 34265

**New Mailing Address:**

**FEI Number:** 26-4246940

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILHITE, TOMMY  
45850 CLAY GULLY RD  
MYAKKA CITY, FL 34251 US

**Name and Address of New Registered Agent:**

WILLHITE, TOMMY  
45850 CLAY GULLY RD  
MYAKKA CITY, FL 34251 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: TOMMY WILLHITE

04/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WILLHITE, TOMMY  
Address: 45850 CLAY GULLY RD  
City-St-Zip: MYAKKA CITY, FL 34251

Title: VP  
Name: SWEET, JUSTIN  
Address: 10221 SE HWY 31  
City-St-Zip: ARCADIA, FL 34266

Title: S  
Name: CALE, CHRISTINA M  
Address: 5029 NW DILL RD  
City-St-Zip: ARCADIA, FL 34266

Title: T  
Name: SKINNER, JAYME L  
Address: 11380 SE HERBERT AVE  
City-St-Zip: ARCADIA, FL 34266

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: JAYME SKINNER

T

04/22/2011

Electronic Signature of Signing Officer or Director

Date