## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000001571

FILED Feb 01, 2010 Secretary of State

Entity Name: BIG BEND HORSEMAN'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

407 MAIN AVENUE SOUTH MONTICELLO, FL 32344

Current Mailing Address: New Mailing Address:

407 MAIN AVENUE SOUTH MONTICELLO, FL 32344

FEI Number: 26-4281679 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WALKER, CLAUDE R ESQ. 1983 CENTRE POINTE BOULEVARD SUITE 200 TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: F

Name: SMITH, WADE

Address: 407 MAIN AVENUE SOUTH City-St-Zip: MONTICELLO, FL 32344 US

Title: VP

Name: DEAN, SHERRI

Address: 8535 S. JEFFERSON ROAD City-St-Zip: LAMONT, FL 32336

Title: SEC Name: BEK, SALLY

Address: 9056 COURTLAND WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: TREA

Name: ESSIG, JANE

Address: 13000 FOREST RUN COURT City-St-Zip: TALLAHASSEE, FL 32317

Title: [

Name: CONNER, DOYLE JR.

Address: 385 NORTH MULBERRY STREET City-St-Zip: MONTICELLO, FL 32344

Title: [

Name: EVERETT, SUE

Address: 3920 BILL CARLTON ROAD City-St-Zip: PERRY, FL 32347

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: SHERRI DEAN VP 02/01/2010