

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008901

FILED  
May 03, 2010  
Secretary of State

**Entity Name:** WICKHAM PARK EQUINE CLUB, INC.

**Current Principal Place of Business:**

4505 ELDORADO WAY  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

4505 ELDORADO WAY  
MELBOURNE, FL 32934

**New Mailing Address:**

**FEI Number:** 27-0940033      **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:**

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

ALTERMAN, VICTORIA  
504 BAY CIRCLE  
INDIAN HARBOUR BEACH, FL 32937      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:** D  
**Name:** HADERLE, PAULA  
**Address:** 4505 ELDORADO WAY  
**City-St-Zip:** MELBOURNE, FL 32934

**Title:** D  
**Name:** ALTERMAN, VICTORIA  
**Address:** 504 BAY CIRCLE  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937

**Title:** D  
**Name:** GILMAN, SUE  
**Address:** 504 BAY CIRCLE  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937

**Title:** D  
**Name:** ROBERTSON, DANA  
**Address:** 2600 WASHINGTON DR.  
**City-St-Zip:** MELBOURNE, FL 32934

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: VICTORIA ALTERMAN

TRRE

05/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date