

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10371

FILED
Feb 19, 2004
Secretary of State

Entity Name: LEE COUNTY HORSEMEN'S ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 314
FT. MYERS, FL 33902

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 314
FT. MYERS, FL 33902

New Mailing Address:

FEI Number: 59-2559362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DERHEIM, SYLVIA
18190 MATT ROAD
N FT MYERS, FL 33917 US

Name and Address of New Registered Agent:

BARLEY, DONNA
3521 SAND ROAD
CAPE CORAL, FL 33993 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: DONNA BARLEY

02/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DERHEIM, SYLVIA
Address: 18190 MATT ROAD
City-St-Zip: N FT MYERS, FL 33917

Title: SD () Delete
Name: BARLEY, DONNA
Address: 3521 SAND ROAD
City-St-Zip: CAPE CORAL, FL 33993

Title: VD () Delete
Name: GRIFFIN, NANCY
Address: 11131 LUCKETT RD EXT
City-St-Zip: FT MYERS, FL 33905

Title: TD () Delete
Name: WISEMAN, SUE
Address: 15921 QUAIL TRAIL
City-St-Zip: FT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARLEY, DONNA
Address: 3521 SAND ROAD
City-St-Zip: CAPE CORAL, FL 33993

Title: VD (X) Change () Addition
Name: ALUOTTO, DONNA
Address: 3130 EL DORADO BLVD
City-St-Zip: CAPE CORAL, FL 33993

Title: SD (X) Change () Addition
Name: AUSTIN, PATRICIA
Address: 8561 NALLE GRADE ROAD
City-St-Zip: N FT MYERS, FL 33917

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONNA BARLEY

PD

02/19/2004

Electronic Signature of Signing Officer or Director

Date