

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N10977 (9)

1. Corporation Name

INDIANTOWN RIDING CLUB, INC.



Principal Place of Business

Mailing Address

TIMER POWERS PARK
P O BOX 762
INDIANTOWN FL 34956
US

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P O BOX 762
INDIANTOWN FL 34956
US

3. Date Incorporated or Qualified
09/05/1985

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0069132

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRATON, JOHNIE
16252 SW MORGAN ST
INDIANTOWN FL 34956

81 Name
Eva J Edwards

82 Street Address (P.O. Box Number is Not Acceptable)

15801 SW Palomino St.

83

84 City

Indiantown

FL

85 Zip Code
34956

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Eva J. Edwards

(NOTE: Registered Agent signature required when reinstating)

6/4/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME DRIGGERS, DENIS
STREET ADDRESS SR 76 GATE 7
CITY-ST-ZIP INDIANTOWN FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE T ☒ DELETE
NAME CRATON, JOHNIE
STREET ADDRESS 16252 SW MORGAN ST
CITY-ST-ZIP INDIANTOWN FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Eva J. Edwards D
2.3 STREET ADDRESS 15801 SW Palomino St.
2.4 CITY-ST-ZIP Indian town, FL.

TITLE V ☐ DELETE
NAME BAKER, REED
STREET ADDRESS 8801 SW FOX BROWN RD
CITY-ST-ZIP INDIANTOWN FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME MCWATTERS, JAMIE
STREET ADDRESS 25 W. COCOANUT DR.
CITY-ST-ZIP LAKE WORTH FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Craig D. Edwards D
4.3 STREET ADDRESS 15801 SW Palomino St
4.4 CITY-ST-ZIP Indian town

TITLE D ☐ DELETE
NAME ALSIP, SUE
STREET ADDRESS 23101 SW CARDAMINE ST
CITY-ST-ZIP INDIANTOWN FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 500001867395
5.4 CITY-ST-ZIP -06/19/96--01083-000 034
***61.25

TITLE S ☒ DELETE
NAME BAKER, CHERYL
STREET ADDRESS 8801 SW FOX BROWN RD
CITY-ST-ZIP INDIANTOWN FL

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME Jenna Driggers D
6.3 STREET ADDRESS SR 76 Gate 7
6.4 CITY-ST-ZIP Indian town, FL.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Eva J. Edwards

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/96

DATE

407-547-3853

DAYTIME PHONE #

CR2E037 (12/95)