FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N14821

(5)

FLORIDA MINIATURE HORSE CLUB, INC.				 	
Principal Place	e of Business	Mailing Address			
624 APPALOSSA RD TARPON SPRINGS FL 34689 US		624 APPALOOSA RAD TARPON SPRINGS FL 34689-9061 US			
00				3. Date Incorporated or Qualified 05/09/1986	3a. Date of Last Report 03/16/1996
2. Principal Pi 21	ace of Business	2a. Mailing Address		4. FEI Number 59-2790916	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
24	25	29 3	0	Florida Statutes	Yes V Z No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
81 Name					
ALBERT KAREN D 624 APPALOOSA RD			82 Street Address (P.O. Box Number is Not Acceptable)		
TARPON SPRINGS FL 34689			83	, , , , , , , , , , , , , , , , , , ,	
			B4 City		FL 85 Zip Code
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 appointment as registered agent. I am familiar with, and accept the appointment as registered agent.					
					1/21/97
SIGNATURE `	Signature typeo or printed name of registered agent		Registere Agent signature re	equited when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE NAME	PD Barnett, Madeline C	DELETE	1.1 TITLE 1.2 NAME	PD Russell O. Mobil	Change Addition
STREET ADORESS	14406 MIDDLEFIELD LN		1.3 STREET ADDRESS	Russell O Mobl 624 APPALOOSA A	IJAD
CITY-ST-ZIP	ODESSA FL 33556		1.4 CITY-ST-ZIP	TARPON SPRINGS, FL	34689
TITLE	VPD	DELETE	2.1 TITLE	VPD	Change Addition
NAME	EVERIDGE, JUDY		2.2 NAME	George Hook	
STREET ADDRESS	10339 HWY 674 N/A		2.3 STREET ADDRESS	RAZ HOY 19-217B Monticello FL 333	$2\Delta r$
CITY - ST - ZIP	LITHIA FL 33547	M or or	2.4 CITY-ST-ZIP		
TITLE	DT KAREN D	☑ DELETE		DT' KAREN D. MOBLE	Change Addition
NAME Street address	ALBERT, KAREN D 624 APPALOOISA ROAD		I .	KAREN D. MOBLE 624 APPALOOSA	'RD.
CITY-ST-ZIP	TARPON SPRINGS FL		3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TARPON SPRINGS	
TITLE	SD	DELETE		SD.	Change Addition
NAME	PETERSON, BEVERLY	·	4. 2 NAME	Elfleda Peters	
STREET ADDRESS	15821 RACETRACK RD		4.3 STREET ADDRESS	Isull Sydney	Road 1
CHTY - ST - ZIP	ODESSA FL 33556		4.4 CITY - ST - ZIP	Dover FL 3	3527
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		•
CITY-ST-ZIP		Driete	5.4 CITY-ST-ZIP		Observed to the second
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME STREET ANNOCSS			6.2 NAME		
STREET ADDRESS	•		6.3 STREET ADDRESS		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath; 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 orlanged, or on an attachment with an address.

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/21/97

873434-740

FILED

Feb 03 1997 8:00am

Secretary of State