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Mar 10, 1999 8:00 am  
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03-10-1999 90102 037 \*\*\*\*61.25

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N14821

1. Corporation Name

FLORIDA MINIATURE HORSE CLUB, INC.

Principal Place of Business

624 APPALOOSA RD  
TARPON SPRINGS FL 34689  
US

Mailing Address

624 APPALOOSA RAD  
TARPON SPRINGS FL 34689  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

05/09/1986

4. FEI Number

59-2790916

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

MOBLEY, KAREN D  
624 APPALOOSA RD  
TARPON SPRINGS FL 34689

We have no  
physical place  
of business.  
We have home  
shows in Florida

11. Pursuant to the provisions of Sections 6  
office or registered agent, or both, in the  
agent. I am familiar with, and accept the

SIGNATURE Frank W. Fernandez  
Signature, typed or printed name of registered agent and title if applicable.

FRANK W. FERNANDEZ TREASURER 2/24/99  
(NOTE: Registered Agent signature required when reinstating)

10. Name and Address of New Registered Agent

81 Name FRANK W FERNANDEZ

82 Street Address (P.O. Box Number is Not Acceptable)  
37024-TUCKER RD.

84 City ZEPHYRHILLS

FL

85 Zip Code 33541

above-named corporation submits this statement for the purpose of changing its registered  
by the corporation's board of directors. I hereby accept the appointment as registered  
agent.

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME MOBLEY, RUSSELL O.  
STREET ADDRESS 624 APPALOOSA ROAD  
CITY-ST-ZIP TARPON SPRINGS FL

DELETE

TITLE VPD  
NAME HOOK, GEORGE  
STREET ADDRESS RT. 2, HWY 19 217B  
CITY-ST-ZIP MONTICELLO FL

DELETE

TITLE DT  
NAME MOBLEY, KAREN D.  
STREET ADDRESS 624 APPALOOSA RD.  
CITY-ST-ZIP TARPON SPRINGS FL

DELETE

TITLE SD  
NAME PETERS, ELFLEDA  
STREET ADDRESS 15441 SYDNEY ROAD  
CITY-ST-ZIP DOVER FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD MARILYN GILCHRIST  
1.2 NAME  
1.3 STREET ADDRESS 2825 NE FT KING ST  
1.4 CITY-ST-ZIP Ocala, FL 34470

Change Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE DT FRANK W. FERNANDEZ  
3.2 NAME  
3.3 STREET ADDRESS 37024 TUCKER RD  
3.4 CITY-ST-ZIP ZEPHYRHILLS FL 33541

Change Addition

4.1 TITLE SD  
4.2 NAME KATHLEEN FOF  
4.3 STREET ADDRESS RT BOX 3030  
4.4 CITY-ST-ZIP FT WHITE, FL 32038

Change Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. I 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 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, with all other like empowered.

SIGNATURE:

FRANK W FERNANDEZ  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)