

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N14821

1. Entity Name

FLORIDA MINIATURE HORSE CLUB, INC.

**FILED**  
Feb 07, 2002 8:00 am  
Secretary of State

02-07-2002 90055 017 \*\*\*\*61.25

Principal Place of Business

1717 SE 165 AVE  
WEIRSDALE FL 32195  
US

Mailing Address

1717 SE 165 AVE  
WEIRSDALE FL 32195  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2790916

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DENTICI, JAMES G.  
1717 SE 165TH AVE.  
WEIRSDALE FL 32195

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME SPIES, GORDON ☒ Delete  
STREET ADDRESS 110 SW HWY 484  
CITY-ST-ZIP DUNNELLON FL 34432

TITLE PD ☒ Change ☐ Addition  
NAME MARILYN GILCHRIST  
STREET ADDRESS 2825 NE FT. KING STREET  
CITY-ST-ZIP OCALA, FLORIDA, 34470

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

TITLE VPD ☒ Change ☐ Addition  
NAME JOHN McDERMOTT  
STREET ADDRESS 24088 SISLER AVE.  
CITY-ST-ZIP CHRISTMAS, FLORIDA, 32709

TITLE DT ☐ Delete  
NAME DENTICI, JAMES G  
STREET ADDRESS 1717 SE 165TH AVE  
CITY-ST-ZIP WEIRSDALE FL 32195

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☒ Delete  
NAME McDERMOTT, BARBARA  
STREET ADDRESS 24088 SISLER AVE  
CITY-ST-ZIP CHRISTMAS FL 32709

TITLE SD ☒ Change ☐ Addition  
NAME ROBIN COLE  
STREET ADDRESS 906 RIVER DRIVE  
CITY-ST-ZIP TEMPLE TERRACE, FLORIDA, 33617

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with an officer like empowered.

SIGNATURE: *James G. Dentici* SIGNATURE OF DIRECTOR: JAMES G. DENTICI 1/20/02 352-821-3767  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)