

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DOCUMENT # N26486

1. Corporation Name
The Equestrian Club Property Owners Association
Inc.

Principal Place of Business
3150 Hickstead Pl.
West Palm Beach FL
33414

Mailing Address
Same

3. Date Incorporated or Qualified
5/18/1988

3a. Date of Last Report
3/14/95

4. FEI Number
65-0069584

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

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

2. Principal Place of Business
21 Suite, Apt #, etc
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt #, etc
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent
Kerry R. Schwencke, Esquire
1645 Palm Beach Lakes Blvd.
Suite 700
West Palm Beach FL 33401

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PP	Hooker, Timothy I.	3150 Hickstead Place	West Palm Beach FL	<input type="checkbox"/>
VD	Lloyd, Frank	3150 Glicker Lane	West Palm Beach FL	<input type="checkbox"/>
SD	Goodman, Joan	3100 Glicker Lane	West Palm Beach FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
1.1	1.2	1.3	1.4	<input type="checkbox"/>
2.1	2.2	2.3	2.4	<input type="checkbox"/>
3.1	3.2	3.3	3.4	<input type="checkbox"/>
4.1	4.2	4.3	4.4	<input type="checkbox"/>
5.1	5.2	5.3	5.4	<input type="checkbox"/>
6.1	6.2	6.3	6.4	<input type="checkbox"/>

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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: Timothy I. Hooker 4/26/96
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)