

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90219 003 ****61.25

DOCUMENT # N35271

1. Entity Name

FLYING HARNESS FARM OWNERS ASSOCIATION, INC.



Principal Place of Business

2030 SW 13TH PLACE
BELL FL
BELL FL 32619
US

Mailing Address

2030 SW 13TH PLACE
BELL FL
BELL FL 32619
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3000002

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HORTON, LINDA
2030 SW 13TH PLACE
BELL FL 32619

7. Name and Address of New Registered Agent

Name **JOAN M. WALKER**

Street Address (P.O. Box Number is Not Acceptable)
1800 SW 15th ST.

City **BELL,**

FL

Zip Code
32619

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Joan M. Walker*
JOAN M. WALKER

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

(NOTE: Registered Agent signature required when reappointing)

DATE

APRIL 24, 2006

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BOIVEN, LARRY
STREET ADDRESS 1709 SW 15TH ST
CITY-ST-ZIP BELL FL 32619

TITLE DST ☒ Delete
NAME HORTON, LINDA
STREET ADDRESS 2030 SW 13TH PLACE
CITY-ST-ZIP BELL FL 32619

TITLE DVP ☐ Delete
NAME WALKER, STEVE
STREET ADDRESS 1800 SW 15TH ST
CITY-ST-ZIP BELL FL 32619

TITLE D ☐ Delete
NAME MORIN, DON
STREET ADDRESS PO BOX 718
CITY-ST-ZIP BELL FL 32619

TITLE D ☐ Delete
NAME HORTON, DAN
STREET ADDRESS 2030 13TH PLACE
CITY-ST-ZIP BELL FL 32619

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME QUARNDOCCIO, ROSS
STREET ADDRESS 205 SW 15th PLACE
CITY-ST-ZIP BELL, FL 32619

TITLE DST ☒ Change ☐ Addition
NAME WALKER, JOAN M.
STREET ADDRESS 1800 SW 15th ST.
CITY-ST-ZIP BELL, FL 32619

TITLE D ☐ Change ☒ Addition
NAME SHAFER, BAMBI
STREET ADDRESS 1750 SW 15th ST.
CITY-ST-ZIP BELL, FL 32619

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

TITLE ☐ Change ☐ Addition
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 exemptions contained in Section 119, 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 all other like empowered.

SIGNATURE:

Joan M. Walker

JOAN M. WALKER

4/24/06 352 413-1149